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ABSTRACT

Caregiver education and support programs help decrease the stress and burden on family caregivers of the elderly. This directory profiles 72 programs for caregivers of elders. Programs are grouped into the categories of education, respite, and support. Education programs address skills and techniques for caregiving and include program implementation instructions. Respite programs offer either information and strategies for starting a respite program or content and methods for providing education and support to respite workers. Support programs describe how to start, sustain, and facilitate a support group. Each profile contains the date the program was developed or published; developer's name or organization; an abstract; curriculum content; setting for which the program was designed; implementation, funding, and evaluation information; reviewer comments; and source for program materials. Where appropriate, reviewers suggest adaptations that would facilitate use of the materials in rural settings. Some profiles include information on the usefulness of program materials for minority groups. Contains a list of program reviewers, an index by program descriptors, an index by program developer, and descriptions of other Center on Rural Elderly publications. (KS)

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ED 370 728

Directory of Education Programs for Caregivers of Elders

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UNIVERSITY OF MISSOURI-KANSAS CITY

Center on Aging Studies

Center on Rural Elderly

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Dear Directory User:

Enclosed is our Directory of Education Programs for Caregivers of Elders, one of three directories of program profiles produced by our Center. At the end of this directory, you will find descriptions of our other two directories, the Directory of Health Education Programs for Elders and the Directory of Intergenerational Programming, as well as information on related Center publications you may wish to order.

The program profiles in each directory include detailed descriptive information derived from several sources. Each profile combines information from the program itself with comments from external reviewers and, when available, additional notes from the program developer(s).

Before turning to the profiles themselves, please read through the introduction and directory instructions, which immediately follow the table of contents. Reading these will help you use the directory more efficiently and appropriately.

In case you have questions about a specific program, each profile includes the name and address of a contact person.

We are pleased to be able to provide this information to assist you in making programming choices in your community and we welcome your comments and suggestions about these materials.

Best regards,

Jim

James M. Galliher, Ph.D.
Director

RC 019243

an equal opportunity institution

ACKNOWLEDGEMENTS

The Center on Rural Elderly wishes to thank all the persons, organizations, and agencies that have been so helpful in developing this directory. These include educational program developers and contacts, program reviewers, project consultants, and Center support and professional staff. Special recognition goes to the Center's secretary, JoAnn Rose, for her conscientious contribution to the design and layout of the directory. The Center is most appreciative to the University of Missouri-Kansas City and the entire University of Missouri system for the help it has provided in making this project possible.

The Center is especially indebted to the W.K. Kellogg Foundation, and to Dr. Helen Grace and Dr. Robert Hodge, for their continuous support, encouragement, and direction.

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INTRODUCTION TO PROGRAM PROFILES

The Center on Rural Elderly is a resource center for professionals interested in specific types of educational programming for rural elders. Our focus has been on rural issues, but many of our materials are also appropriate for urban settings. The programs we have gathered provide professionals with curricular materials, guidelines and resources in three content areas: (1) health education, (2) caregiving of physically, cognitively and emotionally frail older adults, and (3) intergenerational relations.

The process of developing our program profiles included several stages. First, professionals who are specialists in the three program content areas conducted an intensive search for programs in those areas. Next, we created a database of comprehensive information on each program, including an abstract. The database became the foundation for the written program descriptions. External reviewers examined and commented on the program materials and those comments became part of the profiles. Because so few programs focused specifically on rural areas, we asked reviewers to identify adaptations that would facilitate use of the materials in rural settings. These suggestions for adapting the programs for rural use are an important part of each program profile. Similarly, we made a special effort to find programs in each content area that were developed for minority populations. Information on the usefulness of program materials for minority groups appears in the appropriate profiles in each content area.

Please note that because program collection is an on-going process, a few reviews are still "in progress" and are noted this way. Also, although we have verified as much profile information as possible with the program developers, the information is subject to change without notification to the Center.

Education Programs for Caregivers of Elders

As our population ages, the population of older people who have chronic illnesses and/or disabilities is growing rapidly. Most of these older people receive help from family members, which allows them to continue to live in the community. Unfortunately, providing this care is often extremely stressful for the caregivers, with serious consequences for their emotional and physical wellbeing. Caregiver education and support programs help family caregivers decrease their stress and burden.

Program Collection

The programs profiled here were collected by a number of professionals through various networks and disciplines. Our professional staff and consultants decided which programs to include in the directory based on whether the materials met certain criteria. For the caregiving component, programs had to meet the following criteria for inclusion: substantive materials; ongoing or tested programs; credible developing organization; respected principles of care; creative format, content, or funding; and realistic implementation strategies. Programs totally dependent on videotapes or videotapes that stood alone without substantial materials were excluded from this collection.

NOTE: Despite our most conscientious attempts, we may have missed some good programs because of our identification and collection methods or developer non-response. Inclusion of a program in this directory does not constitute an endorsement of that program. We invite readers' suggestions for future program inclusions.

Description of Programs

The caregiving programs are grouped into the three categories: ***Education, Respite*** and ***Support***. Education programs address skills and techniques for caregiving, and program implementation instructions. Respite programs offer either information and strategies for starting a respite program or content and methods for providing education and support to respite workers. Support programs describe how to start, sustain, and/or facilitate a support group. Within these categories intergenerational programs with caregiving content are included and so noted under "Program Type."

Each descriptive profile contains an abstract and information extracted from program materials. The developers of the programs were given the opportunity to review and comment on the information documented. These remarks were incorporated selectively into the profiles. Every attempt has been made to obtain the most current information. Some programs are no longer available or in the process of reprinting and are so designated.

Review Process

Each profile also includes comments from outside reviewers. The programs were reviewed through telephone conferences and a focus group. Reviewers represented diversity in expertise, discipline, and geography, but with a particular interest in rural elders. Reviewers were not asked to rate programs, but rather to offer constructive observations on implementation, content, applicability, and adaptability. Remarks were taped verbatim and condensed for readability and practical use. The responses were varied. Some reviewer comments were incorporated in other parts of the profile where appropriate. Reviewers based their comments on the program materials available, developer- reviewed profiles, and reviewer discussion. The reviewer comments appear toward the end of each profile.

Questions to which reviewers were asked to respond are abbreviated in the profiles and presented here in their entirety as they were submitted to reviewers. Explanations follow each question.

- *What community characteristics would form the "best fit " for this program (e.g., Community resources, supportive settings, specific agencies, etc.)?*

  A discussion of community features necessary or helpful to make the program function effectively, including accessibility of facilities, professional expertise, funding, equipment, or level of sophistication of health care delivery.

- *What characteristics of the target audience would facilitate implementing this program (e.g., Literacy levels, communication skills, physical abilities, etc.)?*

  A description of participants for whom this type of programming would be most effective. There may be several targets to define, such as care recipients, respite workers/caregivers, etc., and several levels, such as lay, professional or volunteer.

- *How time intensive would this program be to plan and execute?*

  Identification of the responsibilities and most time-consuming factors associated with implementing the program as written. This description may be given in terms of hours, days, months, or with respect to full or part-time positions. Obviously, this judgement is extremely difficult to make because the time will vary with the expertise of the coordinator and/or facilitator as well as the location, etc.

- *Is a specialist(s) in the content area(s) required to facilitate this program, either in the planning stage or the execution stage (i.e., Does the facilitator need certain skills in programming, group leadership/management, and/or specialized knowledge of the community, aging, or some subject matter)?*

  A discussion of the background, experiences, skills, knowledge, energy, commitment, credentials, roles, etc., needed to facilitate implementation of the program. This may be difficult to estimate or judge because of variability in the facilitator/presenter's education and experience.

- *What methods are used for evaluating this program?*

  A description of the most effective ways of evaluating this type of programming. Comments may include observation of program's suggested evaluations, difficulties in evaluation, or suggestions for improved or other evaluative methods.

- *Is this program suitable for rural areas or is it adaptable to such?*

  A discussion of barriers within the program that would limit its success in rural areas or ways in which the program might be adapted to a rural community.

- *Other*

  General remarks on issues specific to this type of program, content deficits or strengths, relevance, currency, ease in use, etc.

Caregiver Issues

Caregiving is an emotionally-laden subject. Presenters/facilitators should be sensitive to the many relevant issues and capable of handling and/or referring difficult situations or individuals. Flexibility and sound teaching skills are essential. Caregivers, most especially rural caregivers, often do not trust program staff. Caregivers are more likely to trust a presenter/facilitator who is a resident of the community, or more importantly has personal caregiving experience. The facility sponsoring the program must be scrutinized for the message it conveys. (For example, a hospital may imply respect and credibility in one community and mistrust and negative connotations in others.) Liability issues must be carefully considered through the sponsoring agencies, coordinators, and presenters.

Marketing must be tactful, explicit and truthful. Because of the complexities and demands that caregiving implies, programs must include well-researched resources and available supportive services for each specific community in which they will be taught.

Using the Profiles

We expect that these profiles will provide sufficient information about each program to enable readers to make decisions about its appropriateness, feasibility, and accessibility in a particular setting. **Program materials are available through the contact person or organization cited in the profiles, not through the Center on Rural Elderly.** For further information regarding program directories, other Center publications, or technical assistance, please call or write:

Director
Center on Rural Elderly
University of Missouri-Kansas City
5245 Rockhill Road
Kansas City, Missouri 64110
(816) 235-2180

HOW TO USE PROGRAM PROFILES

A program "profile" is an abbreviated description of the major characteristics and components of a program. The profile contains an abstract, implementation and evaluation information, program developer comments, reviewer comments, and source for program materials. Although each profile contains detailed information, it does not present all the information available in the program materials.

Each program described in this directory is listed by its full name and an associated identifier under its major topic area in the table of contents. For example, **AIDS Dementia Complex Training Manual** is listed under Education Program Profiles with an identifier of E1; **Adult Sitter Clinic Program Manual** is listed under the Respite Program Profiles with an identifier of R1. Thus, an 'E' denotes education programs, 'R' denotes respite programs, and 'S' denotes support programs.

The program identifier is used instead of page numbers to locate a specific program and, in the indices, to identify programs associated with the specified descriptors (see Index A) and program developers (see Index B).

The following is a list of the elements found within a program profile in the order of their presentation. **Within the profiles, the phrase "none specified" is used where information for an element was not included in the program materials, or was not provided by the developer and/or reviewer if asked. In a limited number of instances, reviewer comments were in progress and were not available for this printing of the directory.**

We suggest that you review all the information contained within a program profile rather than concentrating exclusively on one specific elements (e.g., abstract, setting, reviewer comments). Each program is unique and cannot be evaluated adequately without reviewing all the information that describes it.

Name of Program:

full program name followed by acronym where applicable

Date Program was Developed:

the date appears in brackets followed by a 'd' in parentheses; e.g., [1988(d)] -- developed in 1988

Date Program was Published:

the date appears in brackets followed by a 'p' in parentheses; e.g., [1989(p)] — published in 1989

Copyright Information:

copyright information appears with the above dates in brackets using these codes:

c -	copyrighted materials (if blank: no copyright)
c uk -	copyright unknown

e.g.,	[1989(d), 1990(p), c]	— copyrighted materials
	[1990(d)]	— no copyright
	[1988(p), c uk]	— copyright unknown

Developer:

all individuals and/or organizations known to be an author/developer of the program; in instances where individuals and organizations are listed, they may or may not be affiliated

Program Category:

category of caregiver education program (see Introduction, page ii)

Abstract:

a brief summary of program

Curriculum Content:

subjects covered in program curriculum

Setting:

type of setting for which program was designed (e.g., rural, urban)

Minority:
program development/modification for minorities

IMPLEMENTATION

Suggested Skills/Credentials:
suggested skills and credentials for program personnel

Suggested Resources/Professionals:
suggested materials and personnel useful or necessary for program implementation

Collaborative Organizations:
organizations useful or necessary for program implementation

Materials and Costs:

- a detailed list of program materials and their associated costs
- information under costs is variable and specifies one of the following: no cost, the actual amount, loan, rent, included (i.e., included in cost of handbook/manual), unlisted (i.e., cost not available)
- 'total pages of materials' is the count of pages for all written materials (promotions, flyers, pamphlets, as well as manual or handbook)

- **NOTE: these listed costs are accurate as of summer, 1990; for most recent cost figures, contact source named under "Materials May Be Obtained From"**

Program Replication:
developer's wishes regarding program replication

FUNDING AND EVALUATION

Original Funding:
funding sources during program development

Type of Evaluation:
type of evaluation (if any) the program has received

Evaluation Results Available From:
source for evaluation results

Selected Developer Comments:
invited developer comments about the program

REVIEWER COMMENTS

These are edited responses to questions used in the review of program materials (see Introduction for the specific questions, pages ii-iii). These comments are grouped into the following categories:

-community characteristics
-target audiences
-time intensity
-content specialist/skills
-evaluation
-other

Materials May be Obtained From:

name, address, and phone number of person(s) and/or organizations to be contacted to obtain the program materials or for additional information about the program (Note: in a few cases, developer did not provide this information)

Program Descriptors:

terms used to describe the content and other relevant program information; these terms may also be used to identify programs (see Index A)

AIDS DEMENTIA COMPLEX TRAINING MANUAL

[1990(p), c]

Developer:

- Family Survival Project for Brain-Impaired Adults

Program Category:

- Caregiver Education

Abstract:

This manual has been developed to assist partners, friends, family members, volunteers and other caregivers of persons with AIDS Dementia Complex to meet their responsibilities by providing information, guidance, skill development and emotional support. The series is composed of six small-group sessions which are informal and participatory. Each session contains an introduction, purpose, objectives, speaker qualifications, schedule (with agenda and time frame), presentation outline, materials, and additional information. An entire chapter is dedicated to a step-by-step preparation for the series which includes: a time frame, budget, sponsorship, planning committee, program and brochure design, scheduling, site selection, registration, material selection, and implementation and evaluation of the series.

Session 1 reviews ADC symptoms, related neurological impairments, diagnostic procedures, cause and treatment, and discussion of commonly used drugs. Session 2 offers information regarding neuropsychological tests and what they measure, differentiation between depression, delirium, delusions, and ADC, and the use of test results to plan long term care. Session 3 content includes behavioral, mental, and motor changes with ADC, identification of reasons for such, strategies for behavior management and their uses in particular situations. Session 4 discusses conservatorship, durable power of attorney, legal issues, financial options, "competency," and individualizing a long term care plan. Session 5 looks at the physical and emotional impact of caregiving, stress causes and symptoms, caregiver self-care, and stress reduction techniques. Session 6 relates the identification of appropriate community services, eligibility and contact person for such, organization of informal networks to share caregiving, and strategies for program advocacy. Extensive articles and handouts are offered. The Appendices include resources, sample letters, forms, brochures, press releases, checklists, evaluation, and bibliography.

Curriculum Content:

- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- HIV and AIDS knowledge
- Knowledge of community resources
- Group leadership and process
- Caregiving experience and/or knowledge
- Understanding of effective listening
- Nurse
- Social worker
- Health educator/professional
- Trainer

Suggested Resources/Professionals:

- Planning committee

Collaborative Organizations:

- Hospital
- Community organization
- Adult day care
- HIV - related agency/service provider

Materials and Costs:

• Facilitator/trainer/leader manual	$45.00
• Camera ready handouts	Included
• Sample news release(s)	Included
• Sample participant evaluation	Included
• Program description	Included
• Brochure/pamphlet	Included
• Administrative forms	Included
• Sample budget/budget guidelines	Included
• Total pages of materials (approx)	199

Program Replication:

- None Specified
- Developer may be contacted regarding questions and technical assistance through (415) 434-3388

FUNDING AND EVALUATION

Original Funding:

- California Department of Mental Health
- Kaiser Permanente Medical Care Program

Type of Evaluation:

- Self-report of attitude and behavior change

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Laura Cole
Family Survival Project
425 Bush Street, Suite 500
San Francisco, CA 94108
(415) 434-3388

Program Descriptors: ADL, AIDS/HIV, care plan, cognition, communication skills, decision making, dementia, depression, difficult behaviors, disabled, dressing, driving, family, family dynamics, finances, grief, health care professional, home, home health, hospital, housing, IADL, legal, living arrangements, long term care, meals, medication, memory, nursing home, peer support, personal care, resources, respite, risk factors, self care, social support, stress, training

ALZHEIMER'S BASIC CARE (ABCS)

[1985(d), 1990(p), c]

Developer:

- Eliza Kennedy Kendall
- The Alzheimer's Association Greater Kansas City Chapter

Program Category:

- Caregiver Education

Abstract:

Alzheimer's Basic Care is a comprehensive teaching manual designed to provide current appropriate and accurate information to professional and family caregivers of Alzheimer's patients, to facilitate professional and family caregivers accessibility to community resources, and to afford a tool for other agencies, institutions and groups interested in AD who presently cannot be reached due to constraints of time, responsibility, or geography. The benefits may include reduction of caregiver burnout and premature institutionalization of the Alzheimer patient through education, motivation to join support groups, and utilization of helplines and other resources for support and relief.

This course is taught through a lecture-discussion format in two, two-hour sessions. Detailed teaching instructions are included. The content is thoroughly scripted. Trigger questions are included throughout the content. The program is divided into four sections, each with its own objectives, outline, introduction, content, and summary. Periodical and quotation references, activities, and other suggestions accompany the appropriate content. Section I. *What Is Alzheimer's Disease*? includes a historical perspective of AD, a description of senile dementia, a definition of AD, statistical impact, physical findings, research theories, symptoms, making a diagnosis, and risk factors. Section II. *Family Concerns* contains patient and family reactions to illness, problems common to families affected by Alzheimer's disease, alternatives of care, legal concerns, and resources. Section III. *Care and Consideration of the Patient A. Behavioral Problems - Management and Prevention* reviews strategies for such behaviors as memory loss, impaired judgement, confusion, wandering, delusions, hallucinations, combativeness, inappropriate sexual behavior, repetition, and communication. Section III. *Care and Consideration of the Patient B. Specific Care Considerations* discusses safety, smoking, driving, grooming, bathing,

dressing, nutrition, toileting, sleep, exercise, amusement, holidays, traveling, doctor appointments/hospital stays, seizures, medications, and caregiver stress. The appendix includes handouts, press releases, letters, brochures/flyers, publication catalogue, quotations, living will information, and detailed outline. The manual contains a bibliography and reference listing as well.

Curriculum Content:
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress
- Holidays
- Activities
- Seizures
- Appointments/Hospital Stays
- Traveling
- Sleep
- Smoking
- Driving
- Dental/oral health
- Hearing
- Vision
- Smoking cessation

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Knowledge of Alzheimer's disease
- Knowledge of community resources
- Knowledge of and/or experience in caregiving
- Teaching experience
- Public speaking experience
- Nurse
- Family caregivers of an Alzheimer's patient
- Social worker
- Physician

Suggested Resources/Professionals:
- Flip chart
- Slide projector
- Carousel

Collaborative Organizations:
- Senior center
- Nursing home
- Older adult organization
- Hospital
- Community organization
- Alzheimer's Association Chapters

Materials and Costs:

Participant handbook/manual	$20.00
Facilitator/trainer/leader manual	Included
Camera ready handouts	Included
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Administrative forms	Included
Plus postage	$2.00
Total pages of materials (approx)	156

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- The John W. and Effie E. Speas Memorial Trust administrated by Boatmen's First National Bank of Kansas City, Missouri

Type of Evaluation:

- Attendance count
- Self-report of attitude and behavior change
- Pretest/post-test
- Follow-up contact

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Contact organization under "Materials Can Be Obtained From:" section for information regarding implementation or further information regarding the program

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Liz Kendall
The Alzheimer's Association, Greater Kansas City Chapter
PO Box 12113
8691 W. 95th Street
Overland Park, KS 66212
(913) 649-5520

Program Descriptors: activities, ADL, adult day care, aging process, Alzheimer's Association, Alzheimer's disease, cognition, communication skills, decision making, dementia, dental care, difficult behaviors, dressing, driving, ethics, exercise, family, family dynamics, finances, grief, health care professional, hearing, IADL, incontinence, legal, long term care, meals, medication, memory, mental health, nursing home, nutrition, peer support, personal care, physician, reminiscence, resources, respite, risk factors, safety, seizures, sensory deprivation, sexuality, smoking, social support, stress, training, vision, volunteer

THE ALZHEIMER'S DISEASE ORIENTATION KIT

[1990(p), c]

Developer:

- The Alzheimer's Association, National Headquarters

Program Category:

- Caregiver Education

Abstract:

The Alzheimer's Disease Orientation Kit is an easily transportable program that offers the tools to individuals and groups to provide accurate information about the symptoms, diagnosis, and caring techniques for the person with Alzheimer's disease in a uniform way. Emphasis has been placed on using a range of Alzheimer's Association education materials in a comprehensive way. The Learning Guide Manual may be used in a teaching forum or as a self-help tool, but is certainly recommended to accompany the videotape.

This has been developed to familiarize the participant with Alzheimer's disease and its effects on the patient and family. It has been designed to help Alzheimer's Association Chapters reach a variety of audiences: newly diagnosed persons, community groups, civic organizations, volunteers, and staff. While the focus is on the family caregiver, professionals may utilize this as well.

The resource kit contains a 15 minute videotape, Learning Guide, caregiver information packet, and master copies of handouts. The Learning Guide includes the following: an overview of Alzheimer's disease; video summary (description and selected excerpts); symptoms, finding a qualified physician; discussion questions and exercises; guidelines on conducting effective discussions, glossary; bibliography; and resource and reference lists; and evaluation tools for each videotape and presentation. Suggestions for the varied uses of the videotape and guide are made.

Curriculum Content:

- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Roles/responsibilities/family dynamics
- Health promotion for the caregiver
- Coping with stress
- Finding a physician
- Physical changes with aging

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of Alzheimer's disease
- Caregiving experience as family member
- Knowledge of community resources
- Teaching ability
- Group experience
- Nurse
- Social worker
- Alzheimer's Association Chapter representative

Suggested Resources/Professionals:

- VCR
- Monitor

Collaborative Organizations:

- Senior center
- Nursing home
- Older adult organization
- Hospital
- Community organization
- Alzheimer's Association Chapters

Materials and Costs:

Facilitator/trainer/leader manual	$160.00
Camera ready handouts	Included
VHS video tape (15 min.)	Included
Script	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Total pages of materials (approx)	44

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Sears Roebuck Foundation funded by Sears, Allstate, Dean Witter, and Coldwell Banker

Type of Evaluation:

- Self-report of attitude and behavior change
- Follow-up contact

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Nancy Erickson
The Alzheimer's Association, National Headquarters
70 E. Lake Street, Suite 600
Chicago, IL 60601-9971
(312) 853-3060

Program Descriptors: Alzheimer's Association, Alzheimer's disease, cognition, community resources, decision making, dementia, family, long term care, physician, respite, volunteer

ALZHEIMER'S 101: THE BASICS FOR CAREGIVING

[1989(p), c]

Developer:
- Anita Bowen
- South Carolina Commission on Aging
- South Carolina Educational Television

Program Category:
- Caregiver Education

Abstract:

Alzheimer's 101: The Basics for Caregiving is an educational package for training professionals and family caregivers of people with Alzheimer's disease and related disorders. It is designed to give professionals, paraprofessionals, and family caregivers the fundamental skills and knowledge needed to care for dementia victims.

The program consists of an 18-hour course of study organized around six central topics, each covered in six corresponding three-hour training sessions devoted to a specific caregiving theme. Each session builds on concepts of the preceding session.

The program training package includes a learner's guide, a trainer's manual, and 85 minutes of video organized into 18 "trigger" segments intended to stimulate discussion and training activities. Individual session materials include three video segments, a section from the learner's guide, and a format for facilitating training, which is contained in the trainer's manual. The combined use of video, discussion, and training activities is meant to offer participants not only practical "how-to" strategies for resolving caregiving problems, but also the opportunity to reflect on the values, attitudes, and skills they possess to enhance their caregiving abilities.

The six units and corresponding video segments are organized as follows: (Unit 1) - *What is Alzheimer's?* - with video segments "Something's Wrong," "Early Stage into Middle Stage," and "Middle Stage into Late Stage"; (Unit 2) - *Communication* - with video segments "Problems in Communication and General Strategies for Coping," "Communication in the

Late Stage," and "Communication with Families and Among Staff"; (Unit 3) - *Behavior* - with video segments "Uncovering Causes and Solutions to Behavior Problems," "Basic Caring Principles for Dealing with Behavior Problems," and "Environmental Considerations in Managing Behavior"; (Unit 4) - *Personal Care* - with video segments "Personal Care and the Family Caregiver," "Encouraging Independence/Recognizing Limitations," and "Caring for the Physically Fit" - with video segments "Exercise," "Meaningful Activity," and "Recreational Activity"; (Unit 6) - *Stress* - with video segments "Stress and the Family Caregiver," "Stress and the Paid Caregiver," and "Look for the Moments."

The training manual provides guidelines for implementing the program, overhead materials, a listing of recommended resources, and a partial script of the video presentation. Funding for the program was provided, in part, by the Administration on Aging, Office of Human Development Services, Department of Health and Human Services.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the care receiver
- Coping with stress

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Broad-based knowledge and experience in caregiver and Alzheimer's disease issues
- Administrative skills
- Communication skills
- Group leadership skills
- Nurse
- Social worker

Suggested Resources/Professionals:

- Audiovisual equipment
- Overhead transparency projector and materials or chart materials
- Demonstration materials such as underwater goggles
- Vaseline
- Blindfolds
- Ear plugs

Collaborative Organizations:

- None Specified

Materials and Costs:

• Participant handbook/manual	$295.00
• Facilitator/trainer/leader manual	Included
• Camera ready overheads	Included
• VHS video tape (85 min)	Included
• Script	Included
• Program description	Included
• Special package available	
• Quantity reductions available	
• Total pages of materials (approx)	184

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Pretest/post-test

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Narrative evaluations are sent out with orders. The results have been tabulated and are available through materials contact.

REVIEWER COMMENTS

Community Characteristics:

- Dollar resources for equipment and materials
- Material, equipment, and leader skills are considerable and sophisticated
- Program may be beyond capabilities of senior centers or AAAs, especially in rural communities

Target Audiences:

- Overall seemed best suited to educated professionals
- At times inconsistent level of presentation--sometimes very simplistic, other times sophisticated
- Some information (e.g., care plan) may be unfamiliar and/or inappropriate for families
- Concepts and dialects may be difficult for some groups to understand, especially minority or rural audiences

- At least a high school education would be necessary for comprehension of the material
- Aides/paraprofessionals should have much experience to benefit from this
- Simulated aging and exercise activities may prohibit disabled or frail elderly from participating

Time Intensity:

- Even with teaching experience, much time is required for planning and implementation
- Review of video in concert with confusing trainer's manual would be time consuming
- The six, three-hour segments speak for themselves in terms of time intensity
- Time for a volunteer is unrealistic, so the expense of a paid trainer would add costs
- At least ten hours would be required to coordinate manuals and video effectively
- Planning and scheduling commitments may present problems

Content Specialist/Skills:

- Substantial knowledge in aging, Alzheimer's disease, behaviors, stress, ADLs, and health promotion
- Group process
- Tact
- Sensitivity
- Teaching skills
- Prioritization and organizational

Evaluation:

- Pre-/post-test does not indicate if course was understood by participants
- No apparent evaluation of reaction to or benefit from the course--would need to be designed by presenter

Other:

- Overall the focus seems to be on multiple issues, levels, and audiences
- Good quality of video and poignant renderings
- Sometimes content of video segments and manuals were difficult to coordinate

- Some language may lead to misconceptions (e.g., "hollowed-out areas of the brain")
- Staging of symptoms can be difficult for families
- Advanced patient descriptions and emphasis on professional issues may be inappropriate for families to view
- Learners manual, by itself, may be a good self-help reference
- Material costs and time and expertise required to implement this program may make this unrealistic for rural communities

Materials May Be Obtained From:

Michael Miller
South Carolina Educational Television
Drawer L, 2712 Milwood Ave.
Columbia, SC 29250
(803) 737-3436

Program Descriptors: activities, ADL, adult day care, aging process, Alzheimer's disease, AoA, care plan, cognition, communication skills, decision making, dementia, difficult behaviors, exercise, family, family dynamics, frail elderly, grief, health promotion, hearing, home, incontinence, long term care, medication, memory, needs assessment, nursing home, personal care, reminiscence, safety, self care, stress, television, vision

AS FAMILIES GROW OLDER:
INFORMATION FOR FAMILY CAREGIVERS (AFGO)

[1986(p)]

Developer:

- Dolores M. Halls
- Stephanie J. FallCreek
- Gene Varela
- The Institute for Gerontological Research and Education
  New Mexico State University
- New Mexico State Agency on Aging
- New Mexico State University Cooperative Extension Services

Program Category:

- Caregiver Education

Abstract:

The As Families Grow Older program provides direct information and skill training to caregivers and service providers.

The program is presented in two days. The first day is for both caregivers and service providers and lasts approximately six hours. The second day is only for service providers. It lasts approximately four hours and discusses how to develop and implement programs for caregivers. At the end of this session, service providers observe a well-designed caregiver workshop.

The participant manual which accompanies this program covers: biological aspects of aging; psychological aspects of aging; intergenerational communication; health care; health promotion and disease prevention; special concerns of the caregiver; institutionalization; legal rights and financial considerations; and community resources which are available to help the family.

This program stresses health promotion not only for the older adult, but also for the caregiver and other family members.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Legal issues
- Community resources/formal services
- Health care issues/health care professionals
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Coping with stress
- Health promotion for the caregiver
- Health promotion for the care receiver
- Communication with health care professionals

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Familiar with group process
- Leadership
- Knowledge of resources, aging, and caregiving
- Health care professional
- Nurse
- Social worker

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:

- Cooperative Extension Services
- Community organizations
- Direct service provider agency
- Older adult organization

Materials and Costs:

• Participant handbook/manual	$10.00
• Facilitator/trainer/leader manual	Included
• Total pages of materials (approx)	169

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Attendance count
- Self-report of attitude and behavior change

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Has been conducted with Native American and Hispanic minorities
- Presenters incorporated culturally appropriate changes depending on participants

- Many culturally relevant suggestions came from participants
- Certain specialists/professionals were used, including doctors, nurses, nutritionists/dietitians, pharmacists, psychologists, physical therapists, and church-affiliated persons
- For content information, please contact Dolores Halls, New Mexico State University, Box 30003, Dept. 3470, Home Economics, Las Cruces, NM 88003-0001, (505) 646-1179 (until 5/31/91)

REVIEWER COMMENTS

Community Characteristics:

- Multi-agency advisory committee to plan and execute sessions

Target Audiences:

- Knowledge of bureaucracy in service system

Time Intensity:

- Due to the many advisory people involved, this program could become time consuming and cumbersome

Content Specialist/Skills:

- Specialists recommended to present in their areas of expertise
- Advisory committee members used to guide dynamics of groups so all the responsibility is not left to one leader

Evaluation:

- Head count
- On-site, written evaluation
- Follow-up evaluation six months later

Other:

- Trainer's manual very general and somewhat hard to follow
- Participant manual very easy to read
- Basic problem for rural areas is ability of service providers to give up two days for training, and then asked to return to conduct the workshop (considering provider's time constraints)

Materials May Be Obtained From:

Jean Coyle/Director
The Institute for Gerontological
Reasearch and Education (TIGRE)
New Mexico State University
P.O. Box 30001, Department 3TG
Las Cruces, NM 88003-0001
(505) 646-3426

Program Descriptors: ADL, aging process, arthritis, cancer, communication skills, Cooperative Extension, depression, diabetes, exercise, finances, health care professional, health promotion, hearing, home health, hospice, hypertension, IADL, legal, lifting/transferring, living arrangements, medication, memory, nursing home, nutrition, physician, relaxation, reminiscence, resources, respite, sensory deprivation, stress, support group, vision

AS PARENTS GROW OLDER

[1987(d)]

Developer:
- Marilyn Schnittjer
- Helen T. Sorensen
- Iowa State University Extension

Program Category:
- Caregiver Education

Abstract:

As Parents Grow Older is a program for persons who are interested in the process of planning with aging parents for their future living and financial arrangements. It is presented in two components, Part I addressing the issue of communicating with aging parents, and Part II dealing with resource planning with aging parents.

Specific topics discussed include concerns facing families with aging persons and the obligation adult children feel toward their parents; ways of providing care for an aging parent; the stresses and rewards of caregiving; what decisions can be made in advance; helping parents take advantage of community services; the family task force; assessing resource adequacy in regard to filling financial, social, physical, spiritual, and mental health needs; grief and loss; the responsibility for location of important legal and financial records; and substitution and coordination of public resources with private for the benefit of aging parents.

Each of the two components is two-and-one-half hours in length. Curriculum materials consist of various publications included with the program agenda.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Financial issues
- Community resources/formal services
- Living arrangements
- Medication management

- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Working knowledge in the area of interpersonal skills and group process
- Aging issues
- Caregiver needs and concerns
- Financial planning and management of family business affairs
- Social worker
- Nurse

Suggested Resources/Professionals:
- Audiovisual materials to be ordered in advance of program presentation

Collaborative Organizations:
- None Specified
- Cooperative Extension Services
- Community Organization

Materials and Costs:

Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Materials include a collection of handouts and brochures available at no cost on a limited basis	No cost
Total pages of materials (approx)	92

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Iowa State University Extension

Type of Evaluation:

- Participant evaluation

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- Audiovisual materials not developed for this, so person implementing program would have to identify and arrange for these helps ("You and Your Aging Parents," "My Mother, My Father," and "Best Wishes Edith and Henry" are suggested videotapes.)

REVIEWER COMMENTS

Community Characteristics:

- Agencies could join together to make presentations; after such, particular services could be available at individual booths for information

Target Audiences:
- Need to read and write to use handouts
- Be articulate about their needs
- Able to sit for two and one half hours at a time

Time Intensity:
- A great deal of time to plan, access services, and obtain handouts

Content Specialist/Skills:
- Group skills to keep discussion going
- Knowledge of aging and caregiving
- Substantial content knowledge to use
- Sketchy curriculum and lesson plan provided

Evaluation:
- Participant evaluation sent months after sessions
- Results (changes in behavior of caregiver or care recipient) were sent to participants

Other:
- Material is sketchy
- Hard to adapt to rural areas

Materials May Be Obtained From:

Helen Sorensen
Iowa State University Extension
3420 University, Suite B
Waterloo, IA 50701
(319) 232-6654

Program Descriptors: aging process, communication skills, Cooperative Extension, family, family dynamics, finances, grief, health promotion, housing, living arrangements, long term care, medication, mental health, retirement

AS PARENTS GROW OLDER:
A MANUAL FOR PROGRAM REPLICATION

[1981(p), c]

Developer:
- Alida G. Silverman
- Carl I. Brahce
- Carol Zielinski
- Child and Family Support Services of Michigan, Inc.
- University of Michigan
  Institute of Gerontology

Program Category:
- Caregiver Education

Abstract:

The As Parents Grow Older program was conceived for the purpose of providing a preventive and supportive approach to alleviate the unpleasant consequences for families of changes associated with "growing old." It is designed to be a small group experience for adults who have older parents or relatives and are in need of some practical knowledge that will help them to understand their older relatives' changing needs as well as their own feelings and actions in response to these needs.

The program consists of support groups conducted as a structured series. The purpose of each session is to create a feeling of mutual trust and understanding, offer guidance along with the opportunity to openly express shared concerns, receive alternative solutions to help solve specific problems relative to those concerns, and to acquire the necessary skills to be better able to deal with current and future life situations.

This program is presented in six, two-hour sessions with the overall objective of helping the participants (1) increase their understanding and knowledge of the aging process; (2) better understand the emotional reactions and needs of older people; (3) develop a greater awareness of their responses to their aged relatives', and thus their own, aging process; (4)

learn to deal more effectively with their own as well as their aged relatives' needs through group problem solving, thus facilitating the development of support systems within the group; (5) acquire greater access to community supports; and (6) be better able to express and explore alternatives to assist themselves and their aged relatives in maintaining an active and productive way of life.

Specific topics addressed in the sessions include psychological aspects of aging, chronic illness and behavioral changes, sensory deprivation and communication, decision making and alternative living situations, financial issues (how to save money on prescriptions, etc.), stages of grief, communicating with health professionals, the value of reminiscence for the Giver and the Recipient, home safety, helpful household gadgets, and confronting the bureaucracy.

The manual is arranged in five sections as follows: (I) Introduction and Program description; (II) Facilitating the Group Process (focuses on the interaction between group members and facilitators); (III) Preparation (provides background and information about advertising, public relations, setting and equipment); (IV) The Sessions (detailed description of the six sessions); and (V) Appendix A (examples of letters, news releases, feature articles, flyers, and announcements); Appendix B (handouts and a listing of supplementary and recommended materials); and Appendix C (bibliography arranged according to specific subject areas).

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills

Setting:
- Developed for any setting
- Run in rural setting
- Suggestions for rural modification are given

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Working knowledge in the area of interpersonal skills and group process
- Non-"instructor" attitude
- Leadership
- Spontaneity
- Counseling skills
- Public speaking
- Knowledge of gerontology
- Nurse
- Doctor
- Gerontologist
- Social worker

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Nursing home
- College
- Religious facility
- Family service agencies
- Mental health agencies
- Social service agencies

Materials and Costs:

Facilitator/trainer/leader manual	$22.00
Camera ready handouts	Included
Sample news release(s)	Included
Brochure/pamphlet	Included
News article	Included
Administrative forms	Included
Canadian orders	$27.00
Additional media materials	Included
Total pages of materials (approx)	278

Program Replication:

- Developer wishes to train those interested in replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health, Education, and Welfare

Type of Evaluation:

- Pretest/post-test

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Modifications - sometimes done in one all-day session to accommodate travel issues.

REVIEWER COMMENTS

Community Characteristics:

- Manual recommends sponsoring agency to draw in experienced presenters, case workers, case management, direct service, local resources, and legalities

Target Audiences:

- Anyone caring for a person 60 years or more
- Limit 10 to 13 participants
- No age limit; could be spouse, sibling, grandchild, etc
- Being able to read and write to complete homework

Time Intensity:

- Very time intensive program
- One full-time person for program implementation
- Two facilitators to share six, two-hour sessions
- Time for supplemental reading
- Planning 10 to 12 weeks in advance to advertise and solicit participants
- Scheduling arrangements
- Seeking and obtaining resources (brochures, video, etc.)

Content Specialist/Skills:

- Knowledge in geriatrics
- Public speaking
- Group process
- Interpersonal skills
- Topic specialist (e.g., M.D. for current medical data)

Evaluation:

- Pre- and post-test done
- Count in repeat attendance may be used
- May hold follow-up groups to assess how participants are adjusting to the aging process

Other:

- Groups should meet no more than once per week
- Developers note to modify to one day may cause overload or overwhelming reaction to the intense and comprehensive information
- Need spacing out of sessions
- Allow discussion and question time

Materials May Be Obtained From:

Ann Hanifan
Child and Family Services of Michigan, Inc.
PO Box 348
2157 University Park Drive
Okemos, MI 48805
(517) 349-6226

Program Descriptors: ADL, aging process, Alzheimer's disease, AoA, cardiovascular system, cognition, communication skills, decision making, dementia, disabled, family, family dynamics, frail elderly, grief, home, home sharing, housing, hypertension, incontinence, IADL, legal, lifting/transferring, living arrangements, long term care, meals, medication, memory, mental health, nursing home, nursing skills, nutrition, peer support, personal care, physician, reminiscence, resources, retirement, safety, self care, sensory deprivation, smoking, stroke, support group

CAREGIVER EDUCATION AND TRAINING PROJECT

[1988(p), c]

Developer:

- Ruth A. Brawdy
- Deborah Viss Bailey
- Susan Schenk
- Doris Harrah
- Nancy Bryant
- Grossmont Hospital

Program Category:

- Caregiver Education

Abstract:

The Caregiver Education and Training Project is a two-part, comprehensive education training program designed to impart (1) specific nursing skills and (2) psychosocial and community knowledge skills to caregivers, particularly those who are older adults who will be caring for a family member at home. Featuring basic home nursing instruction and an orientation to the demands and rewards of caregiving, the project includes two components.

The first component is a home nursing course demonstrating the basic home nursing skills to families who care for an ill, frail, impaired, or older family member in the home. The training program is divided into two levels — a basic course and an advanced course. The basic training is an eight-hour course offered in two sessions. Basic caregiver issues include safety, physical environment, time management, including patient in plans and activities, ambulation assistance, caregiver body mechanics, assistive transfers, community resources, bathing and grooming, nutrition, and reporting signs and symptoms. The advanced course is offered in a single, seven-hour session and deals with such issues as the helpless patient, exercise for the patient, dependent transfers, working with health care professionals, nutrition and fluid intake, and caring for the caregiver. This first component may be taught by a registered nurse with knowledge of basic bedside nursing skills, home care and/or rehabilitation nursing, and emergency techniques. A team-teaching approach is also a possibility.

The second component of the Caregiver Education and Training Project is a companion course which focuses on the psychosocial aspects of caregiving and provides information about community resources. This second course, "Becoming a Caregiver," may be taught by nurses, social workers, staff members of community agencies, and others who are familiar with the aging and/or disabled population. It is helpful if the instructor has had public speaking experience. This component of the project is designed to be completed in one, three-hour session. The sequence of material presented is left to the discretion of the instructor and covers such topics as community resources, out-of-home placements, the decision-making process, conservatorship, and emotional aspects of caregiving. Although the Caregiver Education and Training Project was oriented toward those who are caring for a family member in the home, the sessions may be open to anyone who is currently helping, or anticipating helping, an older person to remain in the home.

These home nursing and psychosocial courses are not intended to supplant existing services in the community such as case management, home health, respite, or hospital discharge planning services. Instead, they are designed to add to and complement any education and training efforts which may be of assistance to any and all caregivers.

A 60-minute videotape and two teaching guides for the nursing and psychosocial components of the program have been developed and are available for purchase.

Curriculum Content:

- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Home safety
- Living arrangements
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress
- Medication management

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Home nursing
- Emergency training
- Patient teaching
- Public speaking
- Knowledge of community resources
- Nurse
- Social worker

Suggested Resources/Professionals:
- VCR
- Monitor
- Nursing skills equipment

Collaborative Organizations:
- Hospital
- Community organization
- Health care agency

Materials and Costs:

• Participant handbook/manual	$89.95
• Facilitator/trainer/leader manual	Included
• Camera ready handouts	Included
• VHS video tape (60 min)	Included

Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Administrative forms	Included
Shipping	$6.50
Special package available	
Total pages of materials (approx)	161

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Department of Human Development Services
  U.S. Department of Health and Human Services
- Grossmont Hospital
  Department of Senior Programs

Type of Evaluation:
- Pretest/post-test

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Final Report available from materials contact
- Varying methods of outreach (to caregivers): publicity and marketing approaches may need to be enhanced and geared toward rural audience

REVIEWER COMMENTS

Community Characteristics:

- Need funding or sponsorship to provide equipment and trainer
- Sponsor may be hospital, home health, or public health agency
- Need persons with expertise in nursing, medical equipment, and community resources
- Local churches, aging agencies, and hospitals could refer participants
- Video equipment and large room for skills practice is needed

Target Audiences:

- High school education
- Consider hearing and visual deficits when using video
- Physical ability to carry out home-skills exercises needs consideration

Time Intensity:

- Manual's completeness reduces time for facilitator preparation
- Time commitment for all teaching components: two, four-hour days; one, seven-hour day; and one, three-hour session
- Part-time position to organize, plan, and coordinate

Content Specialist/Skills:

- Basic nursing skills: home care, rehabilitation, emergency techniques
- Team teaching with nurses, home health care professionals, social workers
- Knowledge of caregiving, aging, and disabilities to teach psychosocial segment

Evaluation:

- Authors provide pre-/post-tests and overall evaluations

Other:

- Church could provide volunteers for training
- Instructor's guide is very complete
- Need to consider whether agencies could afford time to do this and/or caregivers to leave care recipient for that long
- Evaluation very sufficient

- Seven-hour session may be too long for elderly participants
- Transportation and respite need to be considered
- Care in using professional jargon--handouts should be understandable
- Rural elders may not respond well to the term "psychosocial"
- It is less threatening to emphasize "skill building" and the help this program will give them when advertising in rural areas
- Avoid term "community resources" because often families feel they should not be seeking help, but rather that caregiving is their obligation

Materials May Be Obtained From:

Nancy B. Bryant
Grossmont Hospital
PO Box 158
La Mesa, CA 92044
(619) 465-2582

Program Descriptors: ADL, adult day care, AoA, cardiovascular system, case management, communication skills, community resources, decision making, emergency plans, exercise, family, family dynamics, frail elderly, health promotion, home, home health, hospital, incontinence, legal, lifting/transferring, living arrangements, long term care, meals, medication, mental health, nursing home, nursing skills, nutrition, personal care, resources, safety, self care, service organizations, stress, training

CAREGIVER INFORMATION PROJECT - AGING AND OUR FAMILIES

[1987(p), c]

Developer:

- Donna P. Couper
- Travelers Center on Aging
  University of Connecticut
- State of Connecticut Department on Aging

Program Category:

- Caregiver Education

Abstract:

Aging and Our Families was the first of six activities developed within the Caregiver Information Project supported by a grant from the Administration on Aging. The Handbook for Family Caregivers with an accompanying Leader's Guide to Caregiver Programs was developed to educate social service professionals and members of religious institutions about caregiving issues and ways to disseminate information to family members. The Leader's Guide presents practical considerations for developing programs for caregivers. In addition, it contains a suggested curriculum for using the Aging and Our Families Handbook in implementing small group discussion sessions for family caregivers. The program is divided into two full-day and one half-day sessions. The objectives of the training curriculum are to identify the needs of caregivers and the kinds of information and support useful to caregivers; explore the complexities of family intergenerational relationships and the interrelatedness of family relationships in caregiving situations; describe the use of coping skills, styles, and resources of family members and the role of support systems in assisting primary caregivers; examine the common problems that caregivers face and how family relationships influence the decision-making process of caregivers; and explore strategies and techniques for planning and facilitating caregiver information and support programs within religious, social service and health care organizations. Session topics include understanding the aging process, family as caregivers, accepting limitations, interdependence and reciprocity, caring enough to listen/caring enough to confront, the role of the family in health care, living arrangement alternatives, legal and financial decisions, and gaining perspective.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress
- Living wills

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Understanding of caregivers' needs
- Strong communication skills
- Sincerity
- Enthusiasm
- Empathy
- Health care professional
- Social worker
- Nurse

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Religious facility
- Hospital
- Nursing home
- Family service agencies
- Mental health agencies
- Social service departments

Materials and Costs:

• Participant handbook/manual	$14.95
• Facilitator/trainer/leader manual	$17.95
• Total pages of materials (approx)	255

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- Self-report of attitude and behavior change
- Pretest/post-test

Evaluation Results Available From:
- None Specified

Selected Developer Comments:

- Conducted in rural areas throughout Connecticut (very few towns there that meet the federal definition of rural)
- Conducted with minority group--Black
- Facilitators need to avoid giving advice, "helping," "taking over," and set aside own feelings and needs for caregivers' benefits
- Evaluation results included in Final Report which is available from AOA or Lou Goldblatt, Connecticut State Dept. on Aging, 175 Main Street, Hartford, CT 06106
- At present the materials available and listed above with prices are entitled: "Handbook for Family Caregivers" and "Leaders Guide to Caregivers Programs." For content information contact: Dr. Donna Couper, 86 Layton Street, West Hartford, CT 06110, (203) 236-1788.

REVIEWER COMMENTS

Community Characteristics:

- Sponsoring organization required to hold small group sessions
- Not a comprehensive community approach--can be done anywhere
- Dependent on caregiver group leaders who understand members' needs and have good listening skills

Target Audiences:

- Caregivers must be highly motivated to seek information
- Caregivers handbook contains good information which anyone could use

Time Intensity:

- Only time required to locate meeting place and conduct the meeting itself

Content Specialist/Skills:

- Both professionals and lay people may use guide, depending on what sponsor wants to achieve

- Simple information would allow a lay person with limited training to conduct program
- General knowledge on aging may be presented by a lay person
- To go beyond to actual coaching or role playing necessitates a professional with problem-solving knowledge and communication skills

Evaluation:

- Informal, ongoing evaluation of groups conducted to determine most meaningful portions and whether sufficient time is given for particular topics
- Final evaluation of what group members felt they learned and likes and dislikes of the program

Other:

- This program is very elementary
- Handbook for caregivers not quite as elementary as leader's guide and there are certain components that are very good
- Caregiver's manual may be sent to individuals in rural areas for self study

Materials May Be Obtained From:

Mary Grant
Plenum Publishing Corporation
233 Spring Street
New York, NY 10013
(212) 620-8000

Program Descriptors: aging process, communication skills, decision making, family, family dynamics, finances, housing, legal, living arrangements, long term care, religion, state unit on aging, stress, university

THE CAREGIVER KIT

[1990(p), c]

Developer:
- The Alzheimer's Association, National Headquarters
- Broad Street Productions

Program Category:
- Caregiver Education

Abstract:

The Caregiver Kit provides the educational tools to offer practical help and information to family caregivers and care providers. The Caregiver Kit contains five videotapes, a Learning Guide, one audiotape (recording a variety of Alzheimer's Association brochures), a "Just The Facts" Kit (15 fact sheets addressing caregiver issues), a Caregiver Packet (a variety of handouts and information that may be used by the individual caregiver), and master copies of handouts. Suggested audiences include primarily family caregivers, but also support group members, board and staff members, professionals, paraprofessionals, and community organization groups. This program may be used in a group or individual setting.

The Learning Guide, coordinated with the videotape information, is divided into five sections. Each includes content information, detailed objectives, suggested activities, discussion aids, glossary, and references. Evaluation tools for the videotapes and presentation are included. *Meeting Daily Challenges* aims to maximize patient's abilities, structure his daily routines, and simplify difficult activities to encourage patient participation. Content of this section includes: scheduling, personal hygiene, dressing, meals, toileting, activities, and exercise. *Communicating* attempts to provide information regarding why and how communication skills break down, ways to help the AD patient understand others, and techniques for caregivers to understand verbal and non-verbal cues from the patient. Its content includes communication breakdown, health and environmental factors, helping the patient to understand others and be understood, resultant behaviors, and enhancing communications. *Safety First* encourages the participant to learn the symptoms of AD, aging changes that may obstruct safety for the patient, precautions against emergencies involving AD patients, and techniques for accident-

proofing the home for the patient. Content contains: impairments, emergency preparation and procedures, and avoiding safety hazards (with particular attention to meals, medications, the bathroom, bedroom, and kitchen). *Managing Difficult Behaviors* endeavors to convey information regarding: feelings AD patients may experience and resultant behavior; three difficult behaviors and ways to prevent such; techniques for managing behaviors, impaired person's emotional reactions and ways to deal with each; and three ways to manage catastrophic reactions. Content in this section reviews catastrophic behaviors, wandering, hallucinations, delusions, sundowning, repetition, agitation, suspicion, losing or hiding belongings, withdrawal, improper dress, sexually explicit activity, foul language, and Chapter and support group resources. *Caring for Caregiver* describes four entitlement programs for which individuals may be eligible, power of attorney and durable power of attorney, three types of respite care and their advantages, two types of long term residential care available, four points to consider when selecting residential care, and five ways Alzheimer's Association Chapters may assist caregivers. Content covers diagnosis, loneliness, coping techniques, legal and financial information, and help and resources.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress
- Alzheimer's Association information
- Physical changes with aging
- Hearing
- Vision

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Public speaking
- Teaching experience
- Knowledge of Alzheimer's disease
- Caregiving experience
- Knowledge of Alzheimer's Association
- Community Resources Awareness
- Nurse
- Social worker
- Alzheimer's Association Member
- Caregiver

Suggested Resources/Professionals:

- VCR
- Monitor
- Tape recorder

Collaborative Organizations:

- Senior center
- Nursing home
- Older adult organization
- Hospital
- Community organization
- Alzheimer's Association Chapters

Materials and Costs:

• Participant handbook/manual	$399.00
• Facilitator/trainer/leader manual	Included
• Camera ready handouts	Included
• VHS video tape (20 min. each)	Included

Audio tape	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Administrative forms	Included
Total pages of materials (approx)	125

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Drexel, Burnham, Lambert Foundation

Type of Evaluation:

- Self-report of attitude and behavior change
- Follow-up contact

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Nancy Erickson
The Alzheimer's Association, National Headquarters
70 E. Lake Street, Suite 600
Chicago, IL 60601-9971
(312) 853-3060

Program Descriptors: activities, ADL, adult day care, aging process, Alzheimer's Association, Alzheimer's disease, care plan, cognition, communication skills, decision making, dementia, difficult behaviors, emergency plans, exercise, family, family dynamics, finances, home, IADL, incontinence, legal, long term care, meals, medication, memory, nursing home, personal care, resources, respite, safety, support group

CARING FOR OLDER FAMILY MEMBERS

[1984(d)]

Developer:

- Ann M. Rhinesmith
- Rutgers Cooperative Extension of Warren County

Program Category:

- Caregiver Education

Abstract:

Caring for Older Family Members targets either present or potential caregivers of older persons. Objectives of the program include the following: 1) development of sensitivity to the normal physiological changes of aging; 2) learning proper techniques and procedures to meet the personal care needs of an elder person; 3) education and practice of communication skills to be used with an elderly relative; 4) enhanced understanding of the psychological and social needs of aged individuals; and 5) improved relationships with elderly relatives and greater confidence in their caregiver roles.

This program is presented in six, two to two and one-half hour sessions utilizing various audiovisual aides, class activities, handouts, and lecture-discussion format. This is designed for several diverse presenters with outlines, scripts, handouts, sample overheads, resources, and references included. The following subjects are addressed: physiological, social/psychological needs, and changes of the aging process, caregiving responsibilities, communication skills, personal care, inter-dependent relationships, housing adaptations, community resources, legalities, medical/financial issues and decision making.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Health care issues/health care professionals
- Home safety
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of aging, legal, and financial issues
- Knowledge of community resources
- Social worker
- Nurse
- Health care educator/professional

Suggested Resources/Professionals:

- None Specified

Collaberative Organizations:

- Older adult organization
- Community organization
- Hospital
- Social service agencies
- Cooperative Extension

Materials and Costs:

Sample participant evaluation	$3.50
Program outline	Included
Total pages of materials (approx)	87

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Rutgers Cooperative Extension Service

Type of Evaluation:

- Attendance count
- Pretest/post-test
- Follow-up phone evaluation; participants rate value of program

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Nurse is required to present Session II.

REVIEWER COMMENTS

Community Characteristics:

- No specific characteristics were identified

Target Audiences:

- High level of communication skills
- Information presented the equivalent of first-year gerontology courses

Time Intensity:

- Sponsoring agency needs time for planning and publicity
- Coordinator must be available for the six, two-hour sessions

Content Specialist/Skills:

- Several specialists required to present some of the training--nurse, lawyer, mental health worker, social worker, and someone knowledgeable in provision of in-home assistance

Evaluation:

- Tracking weekly return rate of participants
- Pre-/post-tests
- Formal evaluation of each individual session
- Six-month follow up with participants after program completion to assess their ability to provide care

Materials May Be Obtained From:

Ann M. Rhinesmith
Rutgers of Warren County - Cooperative Extension
Wayne Dumont Jr. Administration Building, Route 519
Belvidere, NJ 07823
(201) 475-5361

Program Descriptors: adaptive equipment, ADL, aging process, communication skills, Cooperative Extension, decision making, exercise, family, family dynamics, finances, foot care, frail elderly, hearing, home, IADL, lifting/transferring, nutrition, peer support, problem solving, resources, safety, sensory deprivation, skin care, university, vision

DEVELOPING A CAREGIVER EDUCATION PROGRAM

[1989(p), c]

Developer:

- Steve Sinovic
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Caregiver Education

Abstract:

Developing a Caregiver Education Program, one of a series of Helping Families Help Themselves programs developed at Good Samaritan Hospital and Medical Center, is a guide for developing a program to inform caregivers and promote the welfare of the people they nurture.

Various formats for the series are suggested, such as a weekly series for a specified period, a monthly series throughout the year, or programs every three months.

Curriculum content for the series is to be selected by the program facilitator to best meet the needs of participants, though a suggested list of topics is provided. The program may be appropriately structured for any audience, i.e., children of aging parents, working caregivers, parents of chronically ill or developmentally disabled children, healthcare or social service professionals, etc.

Issues addressed include defining the caregiver role, five levels of caregiving, planning the series, accommodating various target audiences, suggested topics, scheduling models, identifying and helping speakers, selecting a location, publicity, budget issues, personal touches, and a suggested program preparation schedule. The program manual also includes the following: (1) list of reference materials; (2) sample text for news release; (3) sample text for flier; (4) a list of resources for free or low-cost publications; (5) sample certificate of completion; sample recognition of attendance certificate; (6) sample certificate of education credit for nursing home administrators; (7) sample participant evaluation form; and (8) sample sign-up sheet.

Curriculum Content:

- Education series content is suggested for programs geared to an older population and information given as to where to send for curriculum materials.

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Communication
- Knowledge of caregiver issues
- Leadership
- Organizational
- Nurse
- Social worker

Suggested Resources/Professionals:

- Planning committee
- Resource materials appropriate to participants
- Cooperation of relevant professionals and organizations
- Guest speakers
- Sponsoring organization/community support

Collaborative Organizations:

- Hospital
- University
- Community organization
- Government agency
- Public health agency
- Social service agency

Materials and Costs:

Facilitator/trainer/leader manual	$8.95
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Special package available	
Quantity reductions available	
Total pages of materials (approx)	32

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Meyer Memorial Trust

Type of Evaluation:
- Self-report of attitude and behavior change

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Part of a "how-to" series
- Six additional booklets will be available this year:

"Developing Caregiver Information Services"
"Developing Communication Tools to Reach Caregivers"
"Developing Health Education Programs"
"Reaching the Employed Caregiver"
"Developing Legal Financial Planning Classes"
"Administrating Caregiver Support Programs"

REVIEWER COMMENTS

Community Characteristics:

- Access to professionals for curriculum delivery
- Sponsors such as junior colleges, Red Cross, local hospitals, Extension centers, churches, home health agencies are necessary for program's success
- Need and population must be demonstrated to exist

Target Audiences:

- Professional or lay caregivers
- Educational levels will vary with each group
- Facilitator is charged with the responsibility of insuring a "fit" between the literacy levels and content curriculum
- Respite services may need to be available
- Transportation, scheduling convenience, location, acoustics, and disability/aging accessibility are factors to consider

Time Intensity:

- Time investment depends on choice and number of programs offered
- Setting up planning committee increases time commitment but yields feelings of ownership by community
- Chairing the committee could be part of a staff role from the sponsoring agency
- The educational component requires additional time and expertise in preparation and class time

Content Specialist/Skills:

- Not addressed by reviewer

Evaluation:

- A simple, non-threatening evaluation tool was included
- Program as a whole not evaluated

Rurality:

- Ease of using manual would facilitate rural implementation
- Agencies cited for sponsorship are realistic and present in rural areas

- Numbers of professionals for planning and educational component may be lacking in rural areas
- Community caregiver participation in planning may provide humanpower and content appropriateness
- Rural hospitals or nursing homes may be sponsors and site of program - these may be credible institutions for medical information from rural perspective (on the other hand, they are emotionally laden sites and may need to be avoided)
- Less threatening locations such as churches or community centers may be used

Other:

- The focus of education is important because caregivers are more willing to attend to help loved one rather than for own help
- Education is generic
- No assessment tool, hence, planning committee must discuss and suggest curriculum

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: adult education, budget, hospital, resources, schedule, service organizations, speakers bureau

DEVELOPING A CAREGIVER TRAINING PROGRAM

[1989(p), c]

Developer:

- Steve Sinovic
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Caregiver Education

Abstract:

Developing a Caregiver Training Program is one of a series of Helping Families Help Themselves programs developed at Good Samaritan Hospital and Medical Center. It is a guide for developing an in-depth training program for caregivers which stresses skills building and hands-on instruction.

Comprehensive training is suggested to take place over several sessions, the format of which is left open for adaptability to individual circumstances. Core curriculum areas to be covered in the training course are to be selected by the program facilitator to best meet the needs of participants.

Issues addressed in the manual include getting the program started, developing objectives, developing content, locating volunteer instructors, publicity, personal touches, and a suggested program preparation schedule. The program manual also includes the following: (1) list of reference materials; (2) sample news release; (3) sample text for flier; (4) sample recognition of attendance certificate; (5) sample participant survey form; and (6) sample public service announcement.

Curriculum Content:

- Curriculum content is developed by the facilitator and a caregiver self-assessment tool
- Curriculum materials are available through references

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Administrative skills
- Knowledge of caregiver issue
- Leadership
- Knowledge of community resources
- Nurse
- Social worker

Suggested Resources/Professionals:
- Planning committee resource materials appropriate to participants
- Cooperation of relevant professionals and organizations
- Guest speakers
- Sponsoring organization/community support

Collaborative Organizations:
- Senior center
- Hospital
- College
- Community organization
- Public health agency
- Government agency
- Social Service agency

Materials and Costs:

• Facilitator/trainer/leader manual	$8.95
• Sample news release(s)	Included
• Program description	Included
• Administrative forms	Included
• Special package available	
• Quantity reductions available	
• Total pages of materials (approx)	24

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Meyer Memorial Trust

Type of Evaluation:
- None Specified

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Part of a "how-to" series.

REVIEWER COMMENTS

Community Characteristics:
- Access to and identification of caregivers are crucial since they are vital to design of program

- No caregiver identification or recruitment tactics given
- Physicians may identify caregivers
- Sponsors of program essential - may be church, visiting nurse association, civic center
- Resources for curriculum content included

Target Audiences:

- High trust level of caregivers willing to express their needs
- Respite care availability
- Time and transportation for participants

Time Intensity:

- Not full-time facilitator
- Time will vary with population group and content they want to learn

Content Specialist/Skills:

- Facilitator skills
- Administrative, leadership, knowledge of caregiver issues, community, and resource
- Trainer skills
- Background in human services, health education or provision
- Knowledge of caregiver skills
- Public speaking experience
- Teaching or working with groups

Evaluation:

- None included
- However, other Good Samaritan manuals contain such that could be adapted here

Rurality:

- May work well if able to identify caregivers
- Described sponsoring agencies probably would be available in rural setting
- Probably work well in small town where people know one another and feel trust

Other:

- Did suggest surveying professionals working with caregivers to reach out and build community ownership
- Survey would provide good information
- Acknowledgement of caregiver expertise (encouragement to have caregivers share what they have learned) is very significant in adult learning experience
- Practicality stressed and is important

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: frail elderly, hospital, resources, training, volunteer

FAMILY CAREGIVER PROGRAM

[1987(d)]

Developer:
- Judith L. Warren
- Texas Agricultural Extension Service
  Texas A&M University

Program Category:
- Caregiver Education

Abstract:

Family Caregiver Program is an educational program for family members who care for elderly relatives. The objectives of the program are (1) to provide an understanding of the feelings that family members experience during a caregiving situation; (2) to provide knowledge about normal aging vs. illness and disease; (3) to provide skills in problem solving and decision making; (4) to increase communication skills; and (5) to increase awareness of community resources.

The program suggests a limit of 20 participants. It consists of four to five, two-and-one-half-hour sessions. Session materials include such things as resource lists, registration and evaluation information, activity sheets, discussion guides, bibliography, etc. Session topics include guilt feelings, family relationships, physical and psychological changes in the later years, common and chronic illnesses of older adults, problem-solving techniques, communication skills, becoming assertive and health and living alternatives.

Steps for preliminary planning and marketing of the program are outlined in the manual.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems

- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the care receiver
- Hospice information
- Some of these curriculum materials also appear in the following programs: *Adult Sitter Clinic Workbook, Adult Sitter Clinic Program Manual, and Training Respite Caregivers for Alzheimer's Family Support.*

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of community resources, caregiving, and aging and family issues
- Social worker
- Nurse
- Gerontology specialist
- County extension agent
- Psychologist
- Minister familiar with gerontology
- Physical therapist
- Registered dietitian
- Occupational therapist

Suggested Resources/Professionals:

- Audio visuals and publications to be ordered in advance through sources listed in the program manual
- Easily obtainable materials, also listed

Collaborative Organizations:

- Task Force
- County Extension
- Representative of Community Support in such areas as Adult Day Care, Home Health Care Agencies, Private Nursing, Adult Sitting, Area Agency on Aging, Nursing Homes, Retirement Homes, Department of Human Services, Visiting Nurse Association, and Alzheimer's Support Groups

Materials and Costs:

• Facilitator/trainer/leader manual	$5.00
• Camera ready handouts	Included
• Program description	Included
• News article	Included
• Administrative forms	Included
• Outline of additional materials necessary for program implementation	Included
• Total pages of materials (approx) (Excluding Optional Additional Materials)	58

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Texas Agricultural Extension Service
  Texas A&M University

Type of Evaluation:
- Pre/post-test

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- The program has been conducted with African American and Hispanic groups
- The following optional materials are available to complement the program: "Buying Medicare-supplement Insurance Program Support Materials," "Self Discovery Through Family History," "The Aging Process," "Widowhood," "Growing Through a Loss," "Widening the Family Circle: Learning to Care for Older Adults," "Individual Growth and Development: Self Expression"
- Specify program name when ordering materials through the office of Judith Warren/Tanya Gunnels

REVIEWER COMMENTS

Community Characteristics:
- The many resource persons required to implement this program may present problems for some rural communities

Target Audiences:
- Participants with a moderate level of literacy and good communication skills who would not be intimidated by the written responses required

Time Intensity:
- Considerable preparation time required, partially because of the variety of activities presented in each session

Content Specialist/Skills:
- Facilitator should be highly knowledgeable in the fields of gerontology and adult education, comfortable with the group process, and possessing good organizational skills and knowledge of community resources

Evaluation:

- A pre-/post-test evaluation was used

Rurality:

- The literacy level required for use of the materials needs to be considered
- Cultural issues are an important consideration in rural areas
- Because of the diversity of rural communities, involvement and ownership of the program by each community, its agencies, and its consumers are essential to program success

Materials May Be Obtained From:

Tanya Gunnels
Texas A&M University
205C Special Services
College Station, TX 77843-2251
(409) 845-1146

Program Descriptors: ADL, adult day care, adult education, aging process, Alzheimer's disease, communication skills, community resources, Cooperative Extension, decision making, dementia, family, family dynamics, finances, frail elderly, grief, hearing, hospice, IADL, long term care, medication, mental health, nursing home, personal care, problem solving, resources, respite, self care, stress, vision

FAMILIES CARING FOR ELDERS

[1987(p)]

Developer:

- Leslie Ragosa
- Robert W. Jackson
- University of Vermont Extension Service
- Vermont Independence Fund
  State Agency of Human Services

Program Category:

- Caregiver Education

Abstract:

Families Caring for Elders is primarily designed to educate family caregivers currently caring for an impaired elder who is living independently. Secondary audiences would include those caregivers who are currently living with their impaired elder, providing much of their needed assistance, and those family, friends, and neighbors of elders who are not presently caring for an elder, but see this as a possibility or probability in the future.

The program has been set up in six modules or unit lesson plans that can be used as a complete workshop series, independently or in combinations. The goals of the program are to increase the knowledge base with regard to the aging process; introduce techniques to improve communication skills; increase understanding of the family's role and responsibilities in elder care; increase practical caring knowledge; increase understanding of the formal service network; increase understanding of how to provide more effective care, with less stress, by integrating formal services with informal supports; and increase the probability of sustaining independent living.

The individual sessions last from 90 minutes to two hours and deal with such topics as the aging process; communication techniques; factors that shape the caregiver's role; caring for aging parents; aging services and social/recreation, nutrition, financial/legal, educational, in-home service/maintenance/personal care, emergency/safety, and transportation support services; and making the home a healthier and safer place to live. Each unit has a summary outline, detailed outline, and a "materials needed" checklist. The appendices also

include resource lists of books, directories, newsletters, manuals, audiovisuals, and activities that correspond to each unit.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Home safety
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Organizational skills
- Administrative skills
- Initiative to develop and expand units and topics for flexibility and modification to local needs
- Health care educator/professional
- Nurse
- Social worker

Suggested Resources/Professionals:

- Additional resource materials and audiovisual presentation materials to be ordered in advance per guidelines included in the manual
- Easily obtainable materials, i.e., marking pens, flip chart, etc., as outlined in the manual

Collaborative Organizations:

- Community Mental Health Centers
- AARP
- AAA
- State Retired Teacher Association Units
- Churches
- Family Service agencies
- Cooperative Extension Services
- Department of Health
- Home Health agencies

Materials and Costs:

Facilitator/trainer/leader manual	Unlisted
Camera ready handouts	Unlisted
Camera ready overheads	Unlisted
Program description	Unlisted
Total pages of materials (approx)	257

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Vermont Independence Fund
- State Agency of Human Services
- University of Vermont Extension Service

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Involvement and integration of community resources would be helpful
- Requires little in the way of special community resources

Target Audiences:

- Individuals with little or moderate caregiving experience

Time Intensity:

- May require initial planning of two to three months prior to implementation
- Agency personnel need notification
- Support and assistance in publicity required

Content Specialist/Skills:

- Gerontologist or other human service professional with skills specific to aging could facilitate program
- With adequate time and preparation, a paraprofessional could lead program

Evaluation:

- Pre-/post-tests after each unit or at end of series may be useful

Other:

- This program does not seem to promote independence or respect for older persons
- Duplication and repetition, both between chapters and within
- Content information is superficial

Materials May Be Obtained From:

Dr. Eric Nichols
University of Vermont
Cooperative Extension Service
Burlington, VT 05405
(802) 656-4050

Program Descriptors: adaptive equipment, aging process, arthritis, cancer, cardiovascular system, communication skills, Cooperative Extension, dementia, family, family dynamics, frail elderly, hearing, home, hypertension, resources, safety, state unit on aging, stroke, vision

A FAMILY EDUCATION SERIES ON ALZHEIMER'S DISEASE TRAINING MANUAL

[1988(p), c]

Developer:

- Family Survival Project for Brain-Impaired Adults

Program Category:

- Caregiver Education

Abstract:

The Alzheimer's Disease Training Manual was designed for the purpose of providing family caregivers of Alzheimer's patients with information which will help them understand their relatives' needs and problems.

The training is divided into five different two-hour workshops offered once each week. Each session includes a 15-minute break. This format is offered as a guide, but may be modified to accommodate any particular situation and the unique needs of the families participating. In some instances, it is not feasible or desireable to present an entire five-session series.

The sessions, ideally presented in a small group setting, provide access to professionals in the field of Alzheimer's disease. Topics addressed include diagnosis, treatment, legal and financial concerns, long-term-care planning, and behavior management. The sessions also have proven to be an effective means for individuals to share information, solve specific problems, and provide support for one another.

The five-week training series has five broad learning objectives. The sessions are designed so that upon completion of the series, families will (1) be familiar with the diagnosis, treatment, and stages of Alzheimer's disease; (2) be able to demonstrate strategies and techniques to deal with "problem" behaviors; (3) be able to identify legal and financial options available to the person with Alzheimer's disease and the family; (4) understand the importance of taking care of one's self and minimizing stress; and (5) recognize and be able to access the Alzheimer's disease resources which exist in their community.

Information on how to implement the program includes suggestions for time frame, budgeting, co-sponsors, publicity, and logistics of the site. Included in the appendix is a reading list with additional materials.

Curriculum Content:
- Legal issues
- Financial issues
- Community resources/formal services
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Sensory deprivation and the communication process
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress
- Respite
- Support Groups
- Content is in brief outline form to be expanded by speaker.

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Experience with Alzheimer's disease and public speaking
- Warmth and accessibility to families
- Flexibility in presentation
- Caregiving experience and training
- Health care professionals
- Social worker

Suggested Resources/Professionals:

- Audiovisual equipment as needed by guest speakers
- Easily obtainable materials such as pencils, paper, etc., as outlined in the manual
- Additional materials to be ordered in advance, as outlined in the manual
- Guest speakers from various disciplines

Collaborative Organizations:

- Community organization
- Health Care organizations
- Support/sponsorship of local businesses and service agencies

Materials and Costs:

Facilitator/trainer/leader manual	$45.00
Sample news release(s)	Included
Sample participant evaluation	Included
Final report	Included
Program description	Included
Brochure/pamphlet	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Total pages of materials (approx)	78

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- California State Dept. of Mental Health

Type of Evaluation:

- Participant evaluation

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Community Characteristics:
- A variety of agencies such as state aging network, mental health setting, or hospital
- Does require technical resources, i.e., VCR and film projector

Target Audiences:
- Must be able to read and write
- High level of comprehension
- Communication abilities and willingness for open discussion

Time Intensity:
- Very time intensive
- Authors recommend four months for planning
- If well organized, probably less than two months

Content Specialist/Skills:
- Specialist in content areas--for example, doctor or nurse to discuss diagnosis and treatment
- Because each section relies on content specialist, leader does not have to be the expert; however, should be aware of each topic and able to answer fundamental questions

Evaluation:

- Evaluation conducted at three different times--first, at the end of five-week session, second, six weeks later, third, six months after end of program
- Information collected includes content learned and applied and what was and was not relevant from the perspective of the participants
- Head count is done

Other:

- Very well-developed program--well organized and universally applicable
- Good supportive information, resources, and references with suggestions for additional materials and audiovisuals
- Relatively accessible in urban, but not rural areas
- Program designed for urban area caregivers, but could be adapted to rural setting
- Five, two-hour sessions may not be feasible in rural areas because of distance to facility and lack of respite
- Program may be modified, geared down, for lower socio-economic populations
- Sponsors may want to provide day care during program
- If specialist is used, explore future availability for phone consultation for follow-up questions--group leader/sponsoring agency could act as liaison so that long distance call is not a barrier to participant

Materials May Be Obtained From:

Laura Cole
Family Survival Project
425 Bush Street, Suite 500
San Francisco, CA 94108
(415) 434-3388

Program Descriptors: Alzheimer's disease, difficult behaviors, finances, legal, resources, safety, stress

E17

FOR THOSE WHO CARE: CAREGIVER EDUCATION AND SUPPORT PROGRAM

[1988(*p*), c]

Developer:

- Cynthia Higbea
- Nancy Silvers
- Elizabeth Pearce
- Lee Memorial Hospital

Program Category:

- Caregiver Education

Abstract:

For Those Who Care is a caregiver education and support program designed to provide information, skill development, and emotional support for families and individual caregivers. The program consists of five, four-hour sessions which are conducted consecutively over a five-day period. It is suggested that the program be repeated on a monthly basis. Also suggested on a monthly basis are support group meetings for graduates of the program.

Program objectives include (1) development of a support group to result in continuity of care and to provide opportunities for peer support; (2) reducing the stress of conflicting demands intrinsic to the caregiver role; (3) increasing knowledge and understanding of the aging process; (4) understanding the relationship between chronic illness and behavior changes in order to develop alternative methods of coping with difficult behavior; (5) increasing medication management skills and communication skills between doctor and patient; (6) training and personal skills; (7) building positive communication skills in dealing with aging changes and in facilitating positive family interaction; (8) recognizing feelings and needs of caregiver and care receiver and achieving a balance between the two; (9) enhancing decision-making skills for care planning; and (10) increasing knowledge of formal and informal support groups and community resources available. Program materials include a Leader's Guide, Participant's Manual, Self Care Manual, and "*Guide Book to Your Good Health.*"

The Leader's Guide is a step-by-step guide for professionals considering developing a caregiver education and support program in their communities. It provides information on program development, including how to obtain funding and referrals and an outline for conducting a community workshop; program implementation, including session content summaries and descriptions of the leader's and participant's roles; and instructional content, including detailed descriptions of the five sessions — objectives, materials, and outlines of each with instructional script and teaching tips in corresponding columns. Also provided in the manual are examples of letters, forms, press releases, resource information, and participant handouts.

The Participant's Manual is designed to serve as a guide for group activities and discussion, as well as resource information for the caregiver education and support classes. It contains brief informational summaries, discussion questions and activities, and suggested additional references for a more comprehensive education.

The Self Care Manual serves as a supplement to one of the program sessions and contains how-to instructions on various personal care procedures. It also includes class demonstration procedures and other techniques which may be helpful at a later time, serving as a handy reference for caregivers.

The "*Guide Book to Your Good Health*" is a health, information, and medication record booklet for use in conjunction with one of the sessions, and later, as a practical guide in patient-doctor communication.

Suggestions for extended support group session topics (legal/financial issues; diet and nutrition/special diets; exercise for frail elderly; additional information on community services; setting limits; various diseases; stress management) are provided in the manual in conjunction with suggested resource persons to lead group discussions (lawyer/bank trust officer; dietitian; physical therapist or exercise physiologist; aging agency representatives; psychologist; physician; counselor).

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety

- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress
- Safety/emergency measures
- Caregiver feelings

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Experience in group work and education
- Basic background in health issues and aging
- Nurse
- Social worker

Suggested Resources/Professionals:
- VCR
- Monitor

Collaborative Organizations:
- Senior center
- Older adult organization
- Area agencies on aging
- Social service agencies
- Public health departments

Materials and Costs:

Participant handbook/manual	$35.00
Facilitator/trainer/leader manual	Included
Camera ready handouts	Included
VHS video tape (22 min.)	$225.00
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
News article	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Above video contains 2 PSAs	
Self-Care Manual	Included
Total pages of materials (approx)	105

Program Replication:
- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- Lee Memorial Hospital

Type of Evaluation:
- Self-report of attitude and behavior change

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- Modifications:
  Made materials more basic
  Made cultural modifications regarding family issues

REVIEWER COMMENTS

Community Characteristics:

- Development of advisory board/task force with key people in aging network for plans, publicity, and funding
- Funding for program — program is intended to be free, but a small fee may be required
- Access to materials and equipment
- Specialists/experts to present, coordinate, facilitate group
- Respite options available

Target Audiences:

- Elderly, primarily spouses, for middle-aged children caring for a spouse or parent
- Materials need to be presented to cover a wide range of individuals
- Site may dictate attendees, i.e., social service agency may connote welfare
- Hospital may be seen as a general location
- Physical environment is important, especially for elders, so consider the following: stairs, hallway access, hearing, and visual losses — may need modifications

Time Intensity:

- Overall coordinator needs to be half time during preparation
- Several hours to contact individuals, organize task force, obtain funds
- Intensive time for week-long, four hours per day workshop
- Someone (coordinator) present to keep program running smoothly besides instructor
- Once in place, minimal planning time required
- Minimal preparation if facilitator is well versed in gerontology as materials are easy to follow and nicely outlined
- Support group leader time for meeting and one and one-half hours per month for planning, reminders, etc.

Content Specialist/Skills:

- Nurse or health care professional for personal care session
- Community resource specialist
- Trained support group facilitator (could emerge from class)

- Advisory board should include professionals in the field representing different agencies and areas

Evaluation:

- A process evaluation
- Suggest possible pre- and post-exams in knowledge and assessing behaviors (e.g., use of respite)
- Support group will allow continued access to participant for evaluations

Materials May Be Obtained From:

Cynthia Higbea
Lee Memorial Hospital, Older Adult Services
PO Drawer 2218
Fort Meyers, FL 33902
(813) 334-5949

Program Descriptors: ADL, aging process, Alzheimer's disease, arthritis, cardiovascular system, community resources, decision making, dementia, dental care, difficult behaviors, emergency plans, exercise, family, family dynamics, foot care, frail elderly, grief, health promotion, hearing, home, hospital, hypertension, IADL, incontinence, meals, medication, nursing skills, nutrition, peer support, personal care, physician, reminiscence, resources, respite, safety, self care, sensory deprivation, stress, stroke, support group

GROWING OLDER: SENSORY CHANGES

[1980(p)]

Developer:
- Vicki L. Schmall
- Oregon State University Cooperative Extension Services

Program Category:
- Caregiver Education

Abstract:

Growing Older: Sensory Changes explores through simulated activities the changes in the senses — vision, hearing, taste, smell and touch — that commonly occur with age.

To simulate age-related changes, participants are given handicapping conditions through the use of a variety of devices and materials and then must complete common day-to-day tasks. The primary goal of the program is to focus on the impact of these sensory changes on the older person as s/he relates to family members and others within an altered and limiting environment. The experience is intended to give participants a greater understanding of older family members and friends who experience sensory changes.

The program is divided into five components dealing with changes in each of the five senses. It's useful not only to family caregivers, but also to professionals and practitioners serving the elderly. The program is also appropriate for participation by elders themselves, with the purpose of helping them understand and adjust to the changes that come with aging.

The format for scheduling of topic presentation is not specifically outlined, so may be adapted to the needs of the user.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Sensory deprivation and the communication process

Setting:
- Developed for rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Knowledge of aging
- Gerontologist

Suggested Resources/Professionals:
- Tape recorder
- Easily obtainable materials as specified in the Leader/Teacher Guide
- Publications and materials obtainable through the County Extension Agent (in Oregon, only)
- Otherwise available from the state office of the OSU Extension Service

Collaborative Organizations:
- Cooperative Extension Services
- Family service agency
- Community organization

Materials and Costs:

• Facilitator/trainer/leader manual	$1.25
• Camera ready handouts	$.50
• Audio tape	Included
• Program description	Included
• Plus postage	Unlisted
• Total pages of materials (approx)	22

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Oregon State University Cooperative Extension Services

Type of Evaluation:

- Attendance count
- Self-report of attitude and behavior change

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Revisions in process 1990
- Has been conducted with Black, Native American, Hispanic and Asian
- Audiotape may be obtained from University of Michigan
- For content information, please contact Vicki Schmall at (503) 737-1014

REVIEWER COMMENTS

Community Characteristics:

- Existing groups such as homemakers, home study club, discussion club
- Could be used in rural areas, small towns, church groups and schools

Target Audiences:

- Junior high educational level on up
- Due to variety of sensory stimulation activities used, group would need to be comfortable with one another

Time Intensity:

- Plan for executing program is very well organized
- May take the leader about one hour to become familiar with materials, one hour to prepare materials and gather activity supplies

Content Specialist/Skills:

- Could be presented by a lay leader
- Specialist not needed

Evaluation:

- No evaluation information in materials

Other:

- Program is very well done
- Could be sent by mail to remote groups who could provide their own tape player
- Good target audience may be practitioners and service providers

Materials May Be Obtained From:

Terry Allen
Oregon State University
Cooperative Extension Services
161 Milan Hall
Corvallis, OR 97331-5106
(503) 737-1014

Program Descriptors: activities, aging process, Cooperative Extension, hearing, senses, sensory deprivation, vision

E19

HANDBOOK FOR INTERFAITH VOLUNTEER CAREGIVING

[1987(p)]

Developer:

- Kenneth Johnson
- Virginia Schiaffina
- National Federation of Interfaith Volunteer Caregivers, Inc.

Program Category:

- Caregiver Education

Abstract:

The Handbook for Interfaith Volunteer Caregiving is in response to continuing requests to the national office of the Interfaith Volunteer Caregivers Program from individuals who want to form a volunteer caregivers' program in their communities. The Handbook is intended to provide essential ingredients that are needed for a successful caregivers' program — one that will exercise the full potential of volunteers to improve the quality of life of the frail, disabled and often isolated persons of all ages. The revised edition condenses the information and advice from the more than 200 Interfaith Caregiving Projects.

Although prepared for interfaith programs, the Handbook is meant to deal with issues and provide information that will be useful in the development of volunteer caregivers' programs under different sponsorship. Included in the Handbook guidelines for forming caregiver programs are issues such as building a coalition, setting up the board, staffing the project, spreading the word to clergy and congregations, telling the community, discovering people most in need, recruiting volunteers, volunteer training, matching volunteers with those in need, how to keep volunteers interested and enthusiastic, program management, and funding a program. Also included in the Handbook are sample correspondence and administrative forms.

Curriculum Content:
- Board development
- Coalition building
- Volunteer recruitment and training
- Funding
- Church relationships

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Executive/administrative skills
- Fund-raising experience
- Public relations skills
- See "Suggested Resources/Professionals"

Suggested Resources/Professionals:
- A coalition
- Board of directors or advisory board
- Board subcommittees
- Project director
- Support staff
- Cooperation and participation of clergy and their congregations
- Access to community resources
- Knowledgeable recruiters
- Support from the media
- Corps of volunteers
- Records keeper(s)
- Funding sources

Materials and Costs:

Facilitator/trainer/leader manual	$25.00
Program description	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Camera ready handouts	Included
Includes shipping and handling	Unlisted
Total pages of materials (approx)	32

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Robert Wood Johnson Foundation

Type of Evaluation:
- None Specified

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- For information on program content, please contact person listed under "Materials Can Be Obtained From"
- A new revision (228 pages) is available

REVIEWER COMMENTS

Community Characteristics:

- Very supportive setting
- Requires commitment from wide number of churches in community
- Good working relationship between churches
- Financial commitment to program from churches
- Large enough home-bound elderly population to justify development of program
- Availability of trained professionals to expand on volunteer training portion of program

Target Audiences:

- Caregivers of frail, home-bound elderly
- Volunteer trainers need to feel comfortable working with frail elders

Time Intensity:

- Considerable planning before clients can be served
- Organizer must obtain support from churches, develop an advisory board, hire staff, recruit and train volunteers, and market the program

Content Specialist/Skills:

- Strong leadership and management skills
- Very diplomatic with skills in fiscal management, fund raising, and public relations
- Volunteer trainers need background in aging, specific knowledge working with frail and home-bound elderly, and working knowledge of available community resources

Evaluation:

- No formal evaluation included

Other:

- Program covers many areas
- Program's length, structure, and organization may limit its use in small rural communities

- Too costly for most rural churches
- If program scaled down, church would be an ideal sponsor because it tends to play a big part in most rural communities
- The idea is wonderful

Materials May Be Obtained From:

Virginia Schiaffina
National Federation of Interfaith Volunteer Caregivers, Inc.
P.O. Box 1939
105 Mary's Avenue
Kingston, NY 12401
(914) 331-1358

Program Descriptors: ADL, church, communication skills, emergency plans, foot care, personal care, religion, resources, safety, training, visiting, volunteer

HAND IN HAND: LEARNING FROM AND CARING FOR OLDER PARENTS

[1984(p), c]

Developer:
- Dawn S. Bressler
- American Association for Retired Persons, Social Outreach and Support

Program Category:
- Caregiver Education

Abstract:

The Hand In Hand: Learning From and Caring For Older Parents program is appropriate for adult children, relatives, and friends who are, or might be, caring for an older adult. The program works to provide education about the aging process, information about government entitlements and community services, and recognition that the caregivers are not alone.

The model program lasts for one entire day, although this format can be easily modified. The program includes an introduction by the program facilitator; keynote speech on physical, social, and psychological changes which accompany the aging process; film and discussion on parent-adult child relationships; sensory impairment simulation exercise; panel presentation on government entitlements and local community services available to older adults; and small group discussions. Ideal group size is between 30 and 45 members.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Community resources/formal services

Setting:
- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of aging, caregiving, and community resources
- Social worker
- Gerontologist
- Nurse

Suggested Resources/Professionals:

- Keynote speaker
- Film or slide/tape presentation on parent-adult child relationships (recommended by manual) requires slide project and screen or VCR and monitor
- Panel of community service providers

Collaborative Organizations:

- Community organization
- Family service agency

Materials and Costs:

• Facilitator/trainer/leader manual	No Cost
• Planning guide	No Cost
• Total pages of materials (approx)	69

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- American Association of Retired Persons

Type of Evaluation:

- Self-report of attitude and behavior change

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- Four additional booklets supplement the program: "*Coping and Caring, Living with Alzheimer's Disease*"; "*An Annotated Bibliography*"; "*A Handbook About Care in the Home*"; and "*Miles Away and Still Caring.*"
- For program content information, please contact: Dawn Bressler, Association Area Director, AARP Area #3, 1680 Duke Street, Second Floor, Alexandria, VA 22314

REVIEWER COMMENTS

Community Characteristics:

- Program may be used in almost any setting

Target Audiences:

- Leader must be aware of educational level of audience
- Language modifications may need to be implemented for lower socio-economic groups

Time Intensity:

- The thorough planning and resource guide reduces time intensity

Content Specialist/Skills:

- Though a specialist is unnecessary, leader should have some knowledge of group process

Evaluation:

- A self-report evaluation immediately following program

Other:

- Follow-up evaluation may be useful
- This program may be easy to implement
- Respite may need to be available
- Participants should be given information on contact for future questions or problems

Materials May Be Obtained From:

Publications Department
American Association of Retired Persons
1909 K Street, NW
Washington, DC 20049
(202) 728-4675

Program Descriptors: AARP, adult education, communication skills, resources, sensory deprivation

HELPING FAMILIES HELP

[1986(p), c]

Developer:

- Beverly J. Crump
- Rhonda Montgomery
- Family Support Project of the Pacific Northwest Long Term Center
- University of Washington-Seattle
  Institute on Aging

Program Category:

- Caregiver Education

Abstract:

Helping Families Help is directed toward caregivers — daughters, sons, spouses and other people who carry the responsibility of regular supportive services for those needing care due to chronic health problems, especially those associated with aging. The purpose of the program is to provide information, skills, and emotional support to participating caregivers, with an emphasis on helping caregivers to continue in their role and maintain a caring relationship with the care receiver.

The program consists of a series of two-hour modules to be conducted weekly for six weeks. Each session includes a section on purpose and objectives, a presentation plan, a presentation guide, and background readings. Information is included in two manuals (a participant and instructors guide) that assists facilitators in choosing speakers, a location, setting a time, and preparing a resource table.

Session topics address such issues as changing family roles, decision making, normal changes with aging, common illnesses of the elderly, community resources, legal concerns, and importance of self-care on the part of the caregiver. Skills taught include coping, caregiving, and communicating effectively with community agencies and health care providers.

This program was utilized in the grant project "Effects of Alternative Family Support Strategies" - Health Care Financing Administration contract no. 95-C-98281, Dec. 1987.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Skills to create a safe environment where participants in the program feel free to communicate openly and can gain a sense of belonging to the group
- Knowledge of aging, caregiving, and community resources
- Health care professional
- Nurse
- Social worker
- Gerontologist

Suggested Resources/Professionals:

- Availability of transportation and respite services
- Resource materials suggested in the manual
- Easily obtainable materials and supplies, as indicated for each session
- Slide projection equipment
- Materials and support of health agencies
- Support groups, agencies and foundations
- Tape recorder

Collaborative Organizations:

- Hospital
- Community organization

Materials and Costs:

Participant handbook/manual	$45.00
Facilitator/trainer/leader manual	$50.00
Slides with audiotape	$35.00
Final report	Unlisted
Program description	Included
35 mm slides (70 each)	Unlisted
Postage and handling - additional charge	Unlisted
Total pages of materials (approx)	366

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test
- Cost effectiveness

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- High-risk population identified — Alzheimer's disease
- For specific information on program, contact Rhonda Montgomery, Director, Institute of Gerontology, Wayne State University, 71-C East Ferry, Knapp Building, Detroit, MI, 48202, (313) 577-2297
- The program has been conducted with Black minorities
- Rural modifications included addition of materials relative to specific services available
- To order directly call: (800) 441-4115

REVIEWER COMMENTS

Community Characteristics:

- Appropriate for almost any community that could support adequate number of participants
- Resource people available as guest lecturers — social worker, nurse, OTR, adult day care staff, pharmacist, attorney, and resource information person
- Community must be willing to cooperate, as program format requests resource table
- A comfortable base setting suggested
- Setting with privacy, physical comfort, and environment which makes participants comfortable

Target Audiences:

- Reading comprehension level and terminology may be at college-text-book level
- Professional jargon used

- Good facilitator could simplify terminology for same content, but it would be difficult for participants to do on their own
- Audience commitment of two hours weekly for six weeks

Time Intensity:

- Very comprehensive with extensive content
- Expertise and background of facilitator would determine preparation time
- Information for session preparation provided
- No suggested outline for planning overall series
- Organization and planning depends on facilitator's position and knowledge of the area

Content Specialist/Skills:

- Not addressed by reviewer

Evaluation:

- Seminars developed and field tested for 20 months with over 300 participants
- No sample evaluation form per session or series is included

Other:

- Very comprehensive, extensive content
- Difficult for some rural communities to find number of caregivers to participate at any one time
- Recommended resource people may not be readily available in some rural areas
- Manual detailed and laid out with specific plans for each session
- Recommend that guest speakers be given presentation plan, back-up reading, to facilitate their ability to stay within content and time frames
- Due to high level of comprehension needed, participants may require more detailed explanation and directions
- Respite may need to be available
- Transportation may be considered
- To facilitate attendance and minimize transportation issues, locations may be rotated if participants are geographically widespread

Materials May Be Obtained From:

Jennifer Zoe
University of Washington, Washington Press
P.O. Box 50096
Seattle, WA 98145-5096
(206) 543-4050

Program Descriptors: ADL, aging process, Alzheimer's disease, AoA, communication skills, decision making, dementia, dental care, exercise, family, family dynamics, finances, foot care, grief, health care professional, home, housing, living arrangements, long term care, meals, medication, memory, nursing home, nutrition, physician, problem solving, resources, safety, self care, skin care, stress

E22

HELP FOR FAMILIES OF THE AGING

[1988(p), c]

Developer:

- Carol Spargo Pierskalla
- Jane Dewey Heald
- Support Source

Program Category:

- Caregiver Education

Abstract:

The Help for Families of the Aging program consists of eight, two-hour sessions. The program's facilitator manual discusses family dynamics, religious issues in caregiving, and barriers to effective caregiving, as well as other issues. The eight workshop sessions, which are covered in both the participant and facilitator manual, are "Adjusting to Aging," "Learning to Listen," "Which Problems Can I Solve?" "Why Do I Feel Stuck?" "How to Help a Friend," "Heartache and Healing," "Trusting My Decisions," and "Fulfilling My Responsibility."

The workshop leader does not have to be a professional, as long as the detailed session plans and instructions are closely followed.

This eight-week seminar will teach participants to do the following: (1) understand intellectually and emotionally what happens to families as they adjust to the losses of old age and accept to necessity of grieving; (2) use the skill of active listening to support group members, aging relatives, and other family members; (3) sort problems into categories and let go of those they can't do anything about; (4) recognize and accept their feelings about unsolvable problems; (5) admit they have choices, even if most are unpalatable; (6) permit themselves to consider the needs of all persons in their families, not just the aging members; (7) identify what is really important to them and balance the claims of different areas of their lives; (8) reconsider the meaning of promises and other expectations; (9) take a first step toward regaining control of their lives.

Participants follow a step-by-step problem-solving process that considers the needs of all members of their families. By learning to trust their own decisions and set limits, they reclaim control of their lives.

The participant's workbook includes activities, resources, and valuable self-help information. The leader's manual describes in detail the planning and implementation of the program and fully outlined, timed, and scripted content. Many illustrations, evaluations, and religious references are included throughout.

Curriculum Content:
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Willingness to discover and express feelings
- Willingness to express own weakness for healing of group
- Group process
- Knowledge of caregiving and family issues

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Religious facility

Materials and Costs:

Participant handbook/manual	$11.95
Facilitator/trainer/leader manual	$39.95
Sample news release(s)	Included
Sample participant evaluation	Included
Quantity reductions available	
Total pages of materials (approx)	304

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Dolfinger-McMahon Foundation of Philadelphia
- Pew Charitable Trust

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Church or community agency for sponsorship

Target Audiences:
- Program appears geared to people who are very involved in church activities

Time Intensity:
- Requires eight sessions — extremely time intensive

Content Specialist/Skills:
- Because the material is so specific and structured a generalist could conduct this program
- Leader needs to be cautious about tapping family dynamics that may be beyond his/her expertise
- Consultant may need to be available for some sessions

Evaluation:
- Information on program evaluation not provided

Other:
- Program sponsored by the Baptist Church with many spiritual overtones and references to scripture
- Material is extensive, very thorough, and very global
- There is a participant workbook, so leader needs to present program as it has been developed
- Cost of manuals may be a problem
- There needs to be caution in doing therapy in a generalist session

Materials May Be Obtained From:

Jane Dewey Heald
Support Source
420 Rutgers Avenue, Suite 2
Swarthmore, PA 19081
(215) 544-3605

Program Descriptors: adult education, church, communication skills, community resources, decision making, discussion group, family, family dynamics, frail elderly, grief, long term care, nursing home, religion, resources, self esteem, support group, volunteer

E23

HELPING YOU CARE: SKILLS BUILDING FOR CARE OF THE CHRONICALLY ILL OR FRAIL ADULT

[1986(p), c]

Developer:

- Marilyn Cleland
- Lorna Grohman
- Good Samaritan Hospital and Medical Center Education and Family Support Services
- Oregon Trail Chapter of the American Red Cross

Program Category:

- Caregiver Education

Abstract:

Helping You Care was developed in response to the expressed needs of family caregivers and from a survey of individuals attending the *Caregiver Series* offered through the Neurological Sciences Center of Good Samaritan Hospital and Medical Center in Portland, Oregon. The goal of the program is to provide low-cost, practical information to caregivers of the chronically ill or frail adult in an accessible, supportive, and confidential setting.

The program is broken down into five, two-hour sessions dealing with the issues of coping with caregiving, understanding aging and the aged, use and misuse of medications, caring with dignity and imagination, and creating a safe and healthy environment for the care receiver. Educational objectives include increasing awareness of stress factors and management, defining various caregiver roles, providing training in the area of communication skills, providing information regarding community services and resources, providing facts about aging and the changes which may occur during the aging process, aiding the elderly in personal hygiene and grooming, providing proper nutrition to elder care receivers, training in the area of evaluating a care receiver's need for social interaction, control and independence; and demonstrating good body mechanics and assistive techniques in lifting and transferring a care receiver.

In addition to course content, the program manual includes detailed steps for setting up the program, instruction for effective use of the program manual, ideas for guest speakers, course outlines, resource guides, handouts, etc.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the care receiver
- Coping with stress

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Working knowledge of aging issues and problems
- Background in social service or health education
- Teaching
- Content knowledge
- Nurse
- Gerontologist
- Social worker

Suggested Resources/Professionals:

- Overhead projector and transparencies
- Audiovisual presentation materials to be ordered in advance, as instructed in the facilitator manual
- Easily obtainable materials, as listed in the manual
- Professional guest speakers

Collaborative Organizations:

- Senior center
- Hospital
- Nursing home
- Religious facility
- School system
- American Red Cross classroom

Materials and Costs:

Facilitator/trainer/leader manual	$45.00
Camera ready handouts	Included
Camera ready overheads	Included
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
News article	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Special package available	
Quantity reductions available	
Total pages of materials (approx)	189

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Type of Evaluation:

- Participant evaluation

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- Video taping of program with Chinese interpreter has been done
- Rural modification:
  Rural nursing home used as site for staff, equipment, and publicity
  More personal contact needed for outreach
- Has been conducted with Native American and Asian minority groups--session one needs to be adapted to cultural needs (material was cut when translated)
- Evaluations done at each program but not systematically compiled
- Mixed classes of family members and foster care providers exposed families to care alternatives in a positive way

REVIEWER COMMENTS

Community Characteristics:

- Agency with health care focus — hospital, adult day care, university, community college, home care agency, or voluntary organization (Red Cross)
- Access to skilled health care professionals
- Health and mental health professionals to serve as guest speakers

Target Audiences:

- High level of literacy (information in handouts quite sophisticated)
- Good communication skills
- Physical abilities to provide hands-on care

Time Intensity:

- Fair amount of time to plan and organize
- Suggested activities would take time to set up
- Session leader needs special skills for initial preparation

Content Specialist/Skills:

- Ideal — geriatric nurse practitioner
- Strong health care or social service background
- Experience in facilitating educational programs which focus on elderly or caregiving issues
- Facilitator needs moderate to high level skills to execute program because of types of games and facilitation exercises used
- Group leadership
- Strong background in aging

Evaluation:

- Consumer satisfaction questionnaire is provided

Other:

- Manual quite comprehensive in terms of resource listing
- This course appears to be used for training home health aids--if so, recommend a pre-/post-test to determine information gained from attending
- Manual is very comprehensive, well written, concise
- Provides speaker outlines that are concise and comprehensive
- Program requires sophisticated trainer able to judge audience and geographic area to modify material for area and level of audience
- Basic information very good--could be simplified and adapted
- Program could be used as separate modules rather than in its entirety
- The one piece missing in program is the issue of long-term-care planning

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: activities, adaptive equipment, ADL, adult education, aging process, communication skills, community resources, decision making, dementia, difficult behaviors, emergency plans, employment, environment, exercise, family, family dynamics, foot care, frail elderly, grief, health care professional, health promotion, hearing, home, home health, hospital, IADL, incontinence, lifting/transferring, meals, medication, mental health, nursing skills, nutrition, personal care, pharmacist, respite, retirement, safety, self esteem, sensory deprivation, skin care, stress, vision, volunteer

HOME IS WHERE THE CARE IS

[1987(p), c]

Developer:

- Karalee T. German
- Women's Initiative, AARP

Program Category:

- Caregiver Education

Abstract:

Home Is Where the Care Is is a guide for the preparation and presentation of a training course for persons who care for a chronically ill, disabled, or frail older person at home. It has been designed by the American Association of Retired Persons (AARP) in response to the growing number of persons who are being cared for at home and to the needs of persons responsible for this care, i.e., family caregivers who are often thrust into very difficult physical and emotional situations for which they were unprepared.

The program is designed for implementation in small community groups and with the intent of lessening the stress on family caregivers by broadening their view of support and aids available to them. The goals of the program are to convey practical information to the caregiver, encourage the independence of the care recipient, emphasize the need for the caregiver to take care of him/herself, make sure the caregiver realizes that he or she is not in the caregiving situation alone, and leave participants with a better way of coping when this course ends. Caregivers will learn about providing personal care, creating a safe and efficient home environment, managing nutrition, medication, financial and legal issues, and utilizing community resources.

The program material is organized into nine, two-hour modules, and is presented in outline format to encourage an informal presentation, as opposed to a lecture presentation. The informality should promote sharing and discussion among the facilitator, the guest presenter, and the caregivers in attendance. The modules may be presented one or two per week, three per day in seminar fashion, or however it will work best for the participants involved.

The basic packet includes planning and presentation guidelines and master copies of materials that may be reproduced or ordered in the needed quantities. Also included are suggestions for lining up respite care for caregivers who need it in order to attend the course.

Regarding cost of the program, the following areas may involve some expense if donations cannot be obtained: advertising the program, a meeting room in which to hold the program, refreshments to serve at each meeting, rental of film ($40) and projector, and duplication of handouts.

Curriculum Content:

- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress
- Respite

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Experience in caregiving
- Experience in utilizing community resources
- Experience in the dynamics of leading small groups
- Access to professionals in the community as speakers
- Teaching experience
- Home nursing background
- Knowledge of aging and family issues
- Nurse
- Health care professional
- Social worker

Suggested Resources/Professionals:

- Film projector
- Respite volunteers
- Personal care aids
- Publications
- Audiovisual presentation materials

Collaborative Organizations:

- Hospital
- Cooperative Ext/4-H
- University
- Office on Aging
- Information and Referral Service
- American Red Cross
- Health-related associations
- Hospices
- Home health care agencies
- Mental health organizations

Materials and Costs:

Facilitator/trainer/leader manual	No Cost
Camera ready handouts	Included
Sample news release(s)	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Program description	Included
News article	Included
Total pages of materials (approx)	263

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Women's Initiative
  American Association of Retired Persons

Type of Evaluation:

- Self-report of attitude and behavior change
- Facilitator evaluation

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- When ordering materials from Dorothy Howe at AARP, specify program name and identification # D/2892.
- There is a program package called "Home Is Where The Care Is" that contains three booklets and five audio cassettes which costs $15.00

REVIEWER COMMENTS

Community Characteristics:

- Most appropriate for organizations and agencies experienced in assisting the disabled, the homebound, and the elderly
- Host community needs funds available for purchase of manuals and handout copies

Target Audiences:

- Middle-class, fairly well-educated individuals
- Fairly literate to complete questionnaires

Time Intensity:

- Very time intensive
- Three to four months to coordinate and plan
- Requires salaried staff person committed entire time to put workshop together
- Coordinator required to attend each of the nine, two-hour sessions

Content Specialist/Skills:

- Coordinator must be very knowledgeable about community resources and how to enlist support of people in program
- Coordinator should have experience leading small groups
- For certain sessions, professionals such as nurses, social workers, or family care employees, and other agency representatives recommended

Evaluation:

- Evaluation appears to be more useful to developer than to organization presenting the program
- Evaluation presented focuses on printed materials rather than actual program being presented

Other:

- Program is totally comprehensive and very well thought out, excellent
- Material very clear and concise — step-by-step instructions with detailed support material for each piece
- Program would be excellent in rural community because if there were no access to many resources, this program describes what is needed
- If specialists are not available for parts of the training, the information is available in the program
- A volunteer coordinator could not do this
- By using volunteers to solicit background information on participants prior to program, coordinator could more easily target course materials to specific needs of audience, especially in the rural area where people are less educated

Materials May Be Obtained From:

Dorothy Howe
American Association of Retired Persons
1909 K Street, N.W.
Washington, DC 20049
(202) 728-4675

Program Descriptors: AARP, adaptive equipment, ADL, bathing, communication skills, dental care, dressing, exercise, family, family dynamics, finances, foot care, frail elderly, home, IADL, incontinence, lifting/transferring, medication, nursing skills, nutrition, personal care, resources, respite, safety

HOUSING AND LONG TERM CARE FOR THE ELDERLY PARENTS TEACHER'S GUIDE

[1987(p)]

Developer:
- Kenneth E. Barber
- A Family Living Program
  Washington State University
  Cooperative Extension

Program Category:
- Caregiver Education

Abstract:

Housing and Long-Term Care for the Elderly Parents Teacher's Guide is designed as a lesson guide for presenting to caregivers housing and care options for their elderly parents who may no longer be able to care for themselves or maintain independent living.

The lesson material is in outline form, requiring familiarity with supplemental materials included with the program. Issues addressed include (1) conditions, situations or indications which cause children to begin to acknowledge that Mom and/or Dad may no longer be able to live independently in their home — fear, dependency, physical deterioration, social activity level decreases, lack of transportation, nutrition problems, changes in grooming habits, loss of spouse, exaggerated eccentricities, abnormal suspicions, severe changes in personal cleanliness, behavioral changes with relatives and others, support networks/persons no longer available, withdrawal from friends and groups; (2) housing and care options — visiting, telephone reassurance, home health agencies, home chore services, use of an Emergency Response System, home health care, nursing care, meals on wheels, nutrition meal sites, grocery shopping and delivery, respite care, telephone service, good neighbors and block watch, legal information/fraud prevention, energy and safety repair, low-cost weatherization/maintenance service, home visiting nurse/therapist team, morning call service from hospital volunteers, home sharing, "granny flats," mother-in-law apartments, continuing-care communities, low-income/senior apartments/congregate housing, adult day care centers, residential care (guest homes), nursing homes; (3) reactions to housing changes — adult child's reactions, parent reactions,

factors contributing to successful adjustment to changes in housing such as flexible attitudes, phone communication, involving parent in the decision-making process, etc.; (4) necessary conditions for parents moving in with children; and (5) resources and helps.

The program format is left open to the discretion of the user. Included with the lesson outline are participant handouts.

Curriculum Content:
- Community resources/formal services
- Behavioral changes/behavioral problems
- Living arrangements
- Decision making/problem solving/communication skills

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Working knowledge of aging and caregiver issues
- Thorough knowledge of primary and supplemental program materials
- Social worker

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Community organization
- Social service agencies

Materials and Costs:

Facilitator/trainer/leader manual	No Cost (1st Copy)
Camera ready handouts	Included
Program description	Included
Total pages of materials (approx)	49

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Washington State University
- USDA
- Cooperative Extension

Type of Evaluation:

- Attendance count
- Self-report of attitude and behavior change
- Participant evaluation

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- Evaluation information not available.

REVIEWER COMMENTS

Community Characteristics:

- Applicable to any community
- Content so friendly, does not require specific community resources or agencies to support lesson plan

Target Audiences:

- Lesson can be targeted to a wide variety of audiences
- Participants expected to participate in group discussions, therefore, good communication skills helpful

Time Intensity:

- Presenter needs access to local housing circumstances because program has generic outline and handouts
- Bibliography assists with locating introductory information
- Leader needs good knowledge of subject matter prior to presentation, otherwise large time investment reading and gathering resource information

Content Specialist/Skills:

- Working knowledge of family and caregiver issues
- Extensive knowledge of housing and care and service options locally available
- Information must be current with foresight of future plans in specific locale
- Good understanding of how elders' level of impairment relates to housing options

Evaluation:

- Participant evaluation card used

Other:

- Not a program per se, but rather a lesson plan for workshops or two-hour program
- Any community may benefit from this
- Lack of rigid development allows presenter flexibility

- Handouts simple and straight forward
- Very friendly lesson plan
- Materials a nice companion lesson for an existing program, but very awkward to stand as a program by itself

Materials May Be Obtained From:

Kenneth E. Barber
Washington State University - Cooperative Extension Service
104 E White Hall
Pullman, WA 99164-2014
(509) 335-2918

Program Descriptors: AARP, Cooperative Extension, family, family dynamics, field trip, frail elderly, home, housing, IADL, living arrangements, long term care, nursing home, resources, university

HOW TO COPE WITH ALZHEIMER'S DISEASE

[1986(d), 1989(p), c]

Developer:

- Jill Boyd
- Sari Frieden
- Kathleen O. Higley
- Peggy E. Spencer
- The Alzheimer's Association
  St. Louis Chapter

Program Category:

- Caregiver Education

Abstract:

This manual is a vehicle to enhance learning about Alzheimer's disease and provide education and support to health care professionals and family caregivers, and thus provide the Alzheimer's patient with dignified and quality care. It focuses on participant learning behaviors and provides instruction and guidance to presenters. Separate courses are provided for health care professionals and family caregivers. The goal, description and objectives of the course, as well as suggested procedures and considerations, precede the session content. The course consists of four, two-hour seminars, each building on the previous, so sequencing is essential. Each section includes objectives, outline, notes, and content. The first session, *Medical Overview*, discusses demographics, causal theories, diagnosis, symptoms, and treatments. Session II, *Communication*, stresses the many aspects of communication and some common behaviors exhibited by AD patients. Session III, *Activities of Daily Living*, covers feeding, dressing, ambulation, incontinence, bathing, and safety. Session IV, *Family Dynamics* (professional caregivers) and *Community Resources /Caregiver Planning* (families) highlight aspects of family dynamics, nursing home placement (the decision, responses, family expectations, and involvement) and roles, as well as community resources and caregiver planning with emphasis on legal and financial issues. Sample handouts, letters, and evaluations for the different sessions appear in two appendices.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Medication management
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Coping with stress

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Teaching experience
- Public speaking
- Knowledge of Alzheimer's disease
- Knowledge of Community Resources
- Social worker
- Nurse
- Alzheimer's Family Member

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:

- Nursing home
- Older adult organization
- Hospital
- Community organization
- Alzheimer's Association Chapters
- Adult day care

Materials and Costs:

Facilitator/trainer/leader manual	$20.00
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Total pages of materials (approx)	93

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- The Alzheimer's Association, St. Louis Chapter

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test
- Attendance count
- Clinical changes determined through follow up

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- This may be used for the education of Health Care Professionals

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Kathy Higley
The Alzheimer's Association, St. Louis Chapter
9374 Olive Street Road
ST. Louis, MO 63132
(314) 432-3422

Program Descriptors: ADL, adult day care, Alzheimer's Association, Alzheimer's disease, cognition, communication skills, decision making, dementia, difficult behaviors, dressing, exercise, family, family dynamics, finances, health care professional, IADL, incontinence, legal, long term care, meals, nursing home, personal care, problem solving, respite, safety, support group

INNOVATIVE APPROACHES TO THE DISSEMINATION OF CAREGIVER INFORMATION THROUGH ETHNIC AND RELIGIOUS GROUPS

[1988(p)]

Developer:

- Christopher L. Hayes
- Joseph Giordano
- Catholic University of America
  National Catholic School of Social Service

Program Category:

- Caregiver Education

Abstract:

Innovative Approaches to the Dissemination of Caregiver Information through Ethnic and Religious Groups is a collaborative project between Catholic University of America and The American Jewish Committee in the development of two dissemination of information models conducted in Washington, D.C. and Chicago, Illinois. Each model involved the development of caregiver forums intended to disseminate information on caregiving and assess the applicability of resource material within different ethnic/minority communities.

Both models share the purpose of reaching those elderly caregivers who, due to various cultural barriers, resist assistance from the aging network. The Washington model focuses on conducting 20 caregiver forums with the following objectives: (1) to enhance knowledge and skills that caregivers use in carrying out their function; (2) to utilize representatives of religious organizations and local aging service providers as resources for caregivers; and (3) to test whether selected caregiver audiovisual and written material addressed the needs of the participants. The Chicago model uses trained facilitators from ethnic, religious, and community agencies to conduct 19 forums throughout the metropolitan Chicago area with the following objectives: (1) to tailor previously developed videos and training materials regarding caregiving for use by caregivers and professionals who service ethnically and religiously diverse populations of elderly (caregivers included professionals, family members, friends, and neighbors); and (2) to develop a model for conducting outreach and using training materials in various ethnic communities which could be replicated in other communities.

The overall objective of this project is to enhance the ability of ethnic/minority caregivers to use knowledge and information in line with their cultural values. The Final Report specifies what materials were used and adapted in these models and information on accessing further training materials is provided. Caregiver information suggested for dissemination is broken down into three major areas: (1) knowledge of the aging process and skills needed to fulfill the role of caregiver; (2) knowledge of community resources for assistance when needed; and (3) knowledge of factors aimed at reducing emotional drain and preventing burn-out among caregivers.

In addition to the dissemination efforts, a major focus of the project is to strengthen self-help behaviors among caregivers within ethnic/minority families and communities.

The project was supported, in part, by award number 90 AM0225/01, from the Administration on Aging, Office of Human Development Services.

Curriculum Content:

- None Specified

Setting:

- Developed for any setting

Minority:

- Minority component/version (Black, Asian, Native American, Hispanic suggested for adaption to any cultural orientation)

IMPLEMENTATION

Suggested Skills/Credentials:

- Intimate knowledge of the needs, capacities, and cultural values of the participants
- Administrative
- Knowledge of caregiver issues and community resources
- Discussion leader skills
- Experience in the aging field
- Gerontologist
- Nurse
- Social worker

Suggested Resources/Professionals:
- VCR and monitor
- Ethnic/minority community leaders
- Materials adapted to ethnic/minority group needs

Collaborative Organizations:
- Religious facility
- Community organization
- Ethnic/minority community organizations
- Advisory board
- Sponsorship
- Community support

Materials and Costs:

Facilitator/trainer/leader manual	Unlisted
Final report	Unlisted
Program description	Unlisted
Total pages of materials (approx)	112

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- Self-report of attitude and behavior change

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Must recognize and support that church and ethnic institutions are bridges to caregivers of such backgrounds
- Significant ethnic and minority population
- Respite services available
- Organization greatly trusted by target group
- Facilities located within ethnic/minority neighborhood
- Resource people with concrete answers to health problems

Target Audiences:

- Specific ethnic/minority caregivers
- In this program: Black, Hispanic, Asian, Native American

Time Intensity:

- Large time commitment for several people
- Audiovisual of a Jewish community's experience tried to generalize other groups and was particularly inappropriate for an indigent Black group
- Necessary revision of AV would be extremely costly in time and monies
- Much time planning forums, meetings, advisory councils, one-on-one marketing of caregiver issues, and need for educational programs
- Adaptation of materials to appropriate cultures and ethnic specificity very time intensive
- Preparation for presentations which varied in time and content--very time intensive

Content Specialist/Skills:

- Program director needs good personal relationships with ethnic and minority group leaders
- Knowledge of aging and caregiver issues

- Community resource understanding
- Presenter needs leadership, administrative, and public speaking skills
- Ideal to have facilitator a minority/ethnic group member
- Partnership with target leaders essential

Evaluation:

- Report looked at attendance and responses of ethnic/minority leaders
- Observations and recording made
- Follow-up interviews with facilitators examined group program progress
- Caregiver evaluation tool a flop due to refusal of participants to use--problems of lighting, literacy, and inability to relax after emotional presentations

Rurality:

- Rural adaptation very difficult with lack of funding, agency support, respite services, and professional and support staffing
- Even with many urban advantages, there were many difficulties and disappointments
- Rural facilities may be unable to meet audiovisual needs
- Existing video probably inappropriate for rural use

Other:

- Findings significant despite failures
- Identification and ongoing communication with key leaders in ethnic/minority communities essential for success
- Often even these leaders (pastors and rabbis) denied caregiver problems
- Particular cultures surpassed usual caregiver reluctance (unrealistic to expect use of support groups with particular eastern minorities who consider display of feelings in group setting inappropriate)
- Videos cannot stand alone
- Resource people requested to address specific problems
- Respite services essential to assure attendance
- Key factor to success was adaptation of materials and presentations to educational, language, and cultural levels of target group
- May use this program as guide to address minority/ethnic needs in other communities

Materials May Be Obtained From:

Christopher L. Hayes
National Center for Women & Retirement Research
Long Island University
Southhampton, NY 11968
(516) 283-4000

Program Descriptors: aging process, Asians, Blacks, church, health care professional, minority, needs assessment, peer support, resources, service organizations, support group, urban

INSTRUCTIONAL MANUAL FOR PARENT CARING PROGRAM VOLUME I: THE FAMILY SERIES

[1984(p), c]

Developer:

- Chandra M.N. Mehrotra
- Sharon M. Randolph
- Darryl M. Dietrich
- College of St. Scholastica

Program Category:

- Caregiver Education

Abstract:

The Parent Caring Family Series is an educational and supportive program for caregivers. The objectives of the program are to provide families with (a) knowledge about various aspects of the aging process; (b) training in interpersonal skills; (c) information about helping resources and legal and financial matters; and (d) knowledge and skills helpful in maintaining their own physical and mental health. In addition to an educational function, the series creates opportunities for problem solving by allowing the participants to express their concerns and to facilitate discussions of their situations at home.

Session activities enable the participants to develop a cohesive group that continues to meet on a regular basis after attending the Family Series. This concept of networking among the participants is an important outcome of the program and enables the participants to provide mutual support to each other on an ongoing basis.

The program is offered in the form of seven weekly seminars addressing such issues as change and loss, therapeutic environments, life review, patterns of adjustment, mental abilities, physiology/health background information on behavior problems associated with aging, depression and medications, differences between dementia and depression, management of senile dementia, hallucinations/disorientation/paranoia, involuntary commitment, the aging process (anatomical changes and tissue/system changes), nutrition, drugs and the aged, the normal communication process, age-related sensory losses,

communication disorders commonly associated with aging, effects of aging on patterns of communication, alternative communication systems, helping resources in aging, legal rights and financial considerations for the elderly, the importance of personal relationships in the process of aging, shared decision making about living arrangements, and stress management for the caregiver.

Each session section in the manual includes the following six components: (1) a statement of purpose; (2) a list of objectives; (3) an outline; (4) a discussion guide narrative which is the main part of each section; (5) a bibliography; and (6) an appendix consisting of handouts, etc. Also included in the manual are participant evaluation forms, a sample pamphlet, and outlines on planning and implementing the program.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the care receiver
- Coping with stress

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Awareness of the specific needs of participants in order to adapt the program to the situation
- Public speaking
- Organizational
- Nurse
- Social worker

Suggested Resources/Professionals:

- Community advisory committee
- Guest speakers
- Audiovisual materials and equipment to be arranged for in advance as outlined in manual

Collaborative Organizations:

- Hospital
- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	$13.00
Camera ready handouts	Included
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Total pages of materials (approx)	216

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test
- Participant evaluation
- Seminar questionnaire
- Process observation form
- Resource Fair evaluation
- Final evaluation
- Impact evaluation

Evaluation Results Available From:

- See "Selected Developer Comments"

Selected Developer Comments:

- Information is provided for organizing seminars in small communities vs. larger cities
- Has been conducted with minority Native Americans with use of speakers familiar with cultural and social customs
- Evaluation results available from C.M.N. Mehrotra, at College of St. Scholastica (address and phone of "Materials May Be Obtained From")

REVIEWER COMMENTS

Community Characteristics:

- Advisory council to plan program
- Requires wide diversity of community agencies
- Members of advisory board should include legal services, hospital/nursing home personnel, home health care agencies, mental health professionals, physicians, and representatives from aging services
- An informal or formal place to hold actual meetings

Target Audiences:

- Participants need to be fairly literate, able to communicate openly
- Physically able to sit through three-hour sessions

Time Intensity:

- Very time intensive to plan and execute
- Requires approximately two to three months of pre-planning time
- Major task to form and involve community advisory board and to plan and execute program

Content Specialist/Skills:

- Director of program does not need to be specialist in aging or community resources since experts are recruited
- Director needs planning, marketing, and group leadership skills

Evaluation:

- Prior to program, data collected about each caregiver and services they were providing care recipient
- Systematic observation of participants during sessions
- Questionnaires and assessments completed by participants
- Speakers completed evaluations on sessions
- At completion of program, participants assessed impact of program on themselves and abilities to provide care

Materials May Be Obtained From:

Nancy Swedland
The College of St. Scholastica, Department of Psychology,
Informal Caregivers Project
1200 Kenwood Avenue
Duluth, MN 55811
(218) 723-6285

Program Descriptors: activities, ADL, aging process, Alzheimer's disease, AoA, cardiovascular system, communication skills, decision making, dementia, depression, difficult behaviors, family, family dynamics, finances, hearing, IADL, legal, medication, memory, mental health, nutrition, resources, sensory deprivation, stress, university, vision

IN SUPPORT OF CAREGIVERS

[1983(p), c]

Developer:
- Marilyn J. Bonjean
- University of Wisconsin-Madison

Program Category:
- Caregiver Education

Abstract:

In Support of Caregivers assists professionals who assess the needs of community caregivers for the elderly.

The program manual explains how to plan and deliver educational and supportive assistance to caregiving families. The manual is appropriate for those persons familiar with caregivers, although no expertise in gerontology or counseling is needed.

Three model program formats are suggested in the program materials. The Six-Session Workshop is a series of six weekly two-hour sessions. In the workshops, different topics--such as family dynamics, physical health, emotions and problem behaviors, housing and living arrangements, financial and legal planning, and community services--are covered. Attendance should be limited to approximately 12 persons so people feel comfortable when sharing. The One-Day Workshop lasts six hours, covering the same topics as the Six-Session Workshop, but in less detail. The Two-Hour Workshop focuses on one of the above topics or on whatever topics the participants wish to discuss.

The program requires approximately two months of planning.

Curriculum Content:

- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Living arrangements
- Roles/responsibilities/family dynamics
- Coping with stress

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of aging process and illnesses
- Group process
- Knowledge of community resources
- Social worker
- Nurse

Suggested Resources/Professionals:

- Tape recorder
- VCR
- Monitor
- Film strip projector

Collaborative Organizations:

- Hospital
- Community organization
- Health care agencies
- Social service agencies

Materials and Costs:

Facilitator/trainer/leader manual	$10.00
VHS video tape (22 min)	$30.00
Filmstrip/audio cassette version Book plus one and one-half inch VHS video tape (ISC300V)	$40.00
Book plus one filmstrip cassette (IC)	$25.00
Total pages of materials (approx)	147

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Faye McBeath Foundation

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Program very informal
- Could be sponsored by any community agency specializing in caregivers and/or the elderly

Target Audiences:

- Information is very basic, so target is the general population

Time Intensity:

- Major time factor involves identifying experts for presentations
- Manual lacks detail regarding content--coordinator needs to work with speakers on specific content

Content Specialist/Skills:

- Facilitator may be interested or knowledgeable about caregiving and aging
- Facilitation skills in area of directing discussion and group process
- Experts such as nurse, financial planner, and attorney to make successful

Evaluation:

- None included

Other:

- Many items in manual are outdated--person using program materials must double check sources
- Minimal number of handouts
- Fair bibliography -- refers primarily to state in which manual was developed
- Information needs to be upgraded for more sophisticated audiences
- Because the emphasis is on small group work, facilitator must work harder to encourage participation in particular activities

Materials May Be Obtained From:

Barbara Dougherty
The Vocational Studies Center
University of Wisconsin-Madison, Publications Unit
964 Educational Sciences Building, 1025 West Johnson Street
Madison, WI 53706
(608) 263-2929

Program Descriptors: communication skills, dementia, depression, family, family dynamics, finances, health promotion, hearing, home, home sharing, legal, living arrangements, mental health, peer support, physician, reminiscence, resources, safety, support group, vision

INTERFAITH CAREGIVERS "TRAIN-THE-TRAINERS" PROJECT

[1987(p)]

Developer:

- Francine M. Flood
- University of the District of Columbia
  Institute of Gerontology
  College of Education and Human Ecology

Program Category:

- Caregiver Education

Abstract:

The Interfaith Caregiver "Train-the-Trainer" Project is designed to provide Interfaith Caregiver Program facilitators with training in presenting information which gives caregivers a basic understanding of the aging process, to enable them to better care for older persons.

The Caregiver Training Program is a 12-hour program. It can be called "Information and Help for Those Who Help the Elderly." This title allows for better understanding of the purpose of the course.

The course is designed to provide family members, friends, and church members who help older persons residing in the community with knowledge, skills, and resources which will result in the following: (1) increased knowledge of the aging process; (2) increased skills in caring for the homebound and bedridden; (3) reduction of stress associated with providing help for the elderly; (4) increased understanding and acceptance of feelings associated with providing help for the elderly; and (5) increased knowledge and utilization of community resources for the elderly.

The program is divided into six, two-hour sessions which address such issues as physical and psychological changes in the later years and physical and emotional factors affecting the aging process; the adult child and the family as a natural support; the stages of death and grief; age-related sensory change and its effect on communication; improving communication between young and old; elements of therapeutic and non-therapeutic

listening environments; communicating with the doctor; the value of reminiscence for the caregiver and the care recipient; medical problems of aging; how aging and disease are related; common and chronic illnesses in the elderly; behavioral changes; memory aids; the caregiver's role; transferring procedure; the importance of exercise for the elderly; diet and nutrition for the elderly; the caregiver's role in relation to medication; feelings and needs of older persons that relate to living situations; alternative living situations; the decision-making process; hints for establishing a stimulating and comprehensive environment for the elderly; home safety checklist; facility checklist; nursing homes; taxes; helping the elderly and the caregiver utilize services and how to locate a community service; and confronting the bureaucracy.

The program materials include a training packet with informational materials to be disseminated to caregivers, listings of handout materials, audiovisual needs, session charts, program forms, and a bibliography; a training manual; class workbooks; "Session Teaching Guides;" and information on "Facilitating the Group Process."

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the care receiver

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested **Skills/Credentials:**

- Working knowledge in the area of interpersonal skills and group process
- Knowledge of aging, legal, caregiver issues, and community resources
- Health care professional
- Social worker
- Nurse

Suggested **Resources/Professionals:**

- Blackboard
- Newsprint chart
- Easel
- Cassette player or tape recorder
- 35mm slide projector with remote control
- 16mm film projector
- Screen
- Preparations, chart materials, and audiovisuals to be ordered as itemized in the handbook
- Easily obtainable items such as name tags, pads of paper, etc., as indicated in the manual

Collaborative **Organizations:**

- Religious facility
- Community organization

Materials and **Costs:**

Participant handbook/manual	Included
Facilitator/trainer/leader manual	Unlisted
Camera ready handouts	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Program description	Included
Total pages of materials (approx)	551

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- Pretest/post-test
- Participant and facilitator evaluations

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Content of the program has been largely derived from "As Parents Grow Older" by Silver, Brache, and Zielinski

REVIEWER COMMENTS

Community Characteristics:
- Participation of many agencies for success

Target Audiences:
- Fairly sophisticated audience
- Participants need a high school education
- Good communication skills due to high level of group participation
- Participants must see, hear, read, interact, and be able to share much affective content throughout sessions

Time **Intensity:**

- Very time intensive to plan and execute
- Program requires obtaining community people for particular components
- Prior to implementation, coordinator must obtain and develop a church profile which identifies church members in need of assistance, resources, and sources of support
- Once resources are mapped, leader must complete a separate congregation member information form for each family in the congregation
- Facilitator must keep a session roster to allow calls to missing attendees to encourage future attendance

Content **Specialist/Skills:**

- High level of understanding of medical terminology and aging issues
- Good interpersonal skills
- Ability to interact with a large number of professionals required to implement program

Evaluation:

- A written pre-/post-test
- A trainer/caregiver class evaluation
- An evaluation of people who were training to replicate the materials for their congregation

Other:

- Program has broad focus and is fairly sophisticated
- Lesson plans are nicely prepared with well-done handouts
- Nice method for evaluation
- It would be difficult to collect professional support necessary for rural setting
- For most rural audiences, level of difficulty of content would need modification
- Many audiovisual materials are included--rural congregations may not have access to these kinds of materials
- An overwhelming amount of material
- There is an assumption that fundamental knowledge is already in place and this program builds on such knowledge (stages and theoretical models of death and dying)
- Much affective content throughout program
- Program so highly structured, it does not allow for the natural to happen

Materials May Be Obtained From:

Clavin Fields
Institute of Gerontology
University of the District of Columbia
College of Education and Human Ecology
1100 Harvard Street, NW, Room 114
Washington, DC 20009
(202) 727-2778

Program Descriptors: ADL, AoA, arthritis, bathing, cardiovascular system, church, communication skills, community resources, decision making, depression, diabetes, dementia, dental care, difficult behaviors, exercise, family, family dynamics, finances, frail elderly, grief, home, home sharing, housing, hypertension, IADL, incontinence, legal, lifting/transferring, living arrangements, long term care, meals, medication, memory, mental health, nursing home, nutrition, organic brain syndrome, Parkinson's disease, personal care, physician, reminiscence, resources, safety, sensory deprivation, stress, stroke, support group, training, vision

INTERGENERATIONAL SERVICE-LEARNING PROJECT

[1981(d)]

Developer:

- Robert G. Bringle
- John F. Kremer
- Indiana University - Purdue University at Indianapolis
  Department of Psychology

Program Category:

- Caregiver Education

Abstract:

The Intergenerational Service-Learning Project was initiated at the request of the National Council on Aging. College students accompanied "Senior Companions" on visits with homebound elderly for an eight-week period. Students received training for the project through two modes. The first consisted of morning and afternoon training sessions which were being provided to new Senior Companions. This training dealt with communication skills, community resources, and an introduction to the Senior Companion Program. The second type of training available to students consisted of four, one-hour sessions independent of Senior Companion participation which dealt with similar issues (communication, resources, the Senior Companion Program).

Two films were used in these training sessions: (1) "Power of Listening" and (2) "Portrait of Grandpa Doc." The students also saw one slide presentation on visual and hearing changes which occur with aging.

During the actual eight-week period of visitation, students were required to mail weekly reports (even if the visits were not made). These reports provided summaries of activities, high points, problems encountered, things they were to do before their next visits, and ratings of the visits. Six weeks into the program and two weeks prior to completion, two additional training/debriefing sessions were held. To mark the end of the project, the students had a party for the senior companions with whom they worked.

Because of the relatively short time period during which the students had contact with the elderly clients, it was unlikely that acute health needs would surface for which the student could provide immediate help. Therefore, from a service perspective, only isolated incidents were anticipated in which a student could help solve a particular medical or social problem for the client. However, because the students were familiar with the client and his or her environment, they were sensitive to the various social and medical needs. The student's weekly reports indicated that they would discuss such problems as a wheelchair which was too small, failing eyesight, the need for a hearing aid, back pain, applying for Medicaid, etc., with the client. The student would follow up the discussion on subsequent visits to determine what the client had been able to accomplish, provide social support to the client for attempting to solve the problem and encourage their efforts, and, on occasion, make contact with an agency in order to obtain the needed help.

The project report includes six points of advice in the following areas to those wishing to replicate the program: (1) environment for the project; (2) managing the project; (3) communication mechanism; (4) training program participation; (5) additional training sessions; and (6) participation in courses on adulthood and aging.

Curriculum Content:
- None Specified

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Management
- Counseling
- Administrative
- Social worker
- Gerontologist

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Older adult organization
- University
- Volunteer senior companions to accompany students
- Cooperation of community agencies
- Participating school

Materials and Costs:

Final report	No Cost
Total pages of materials (approx)	17

Program Replication:
- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- National Council on Aging

Type of Evaluation:
- Pretest/post-test

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Facilitated in urban area with university, nursing school
- Active elderly services
- Volunteer services to match students and seniors
- Sufficient supportive community services available

Target Audiences:

- Home-bound elderly population, socially isolated in need of basic physical or respite care
- Students/young persons

Time Intensity:

- Minimal time for faculty or staff if respite programs, senior citizen networks, and collegiate gerontology or nursing programs (field experience) in place

Content Specialist/Skills:

- Knowledge of aging, health, sociology, nursing, or psychology needed to supervise, orient, evaluate, and train students and seniors
- Planning and organization to implement

Evaluation:

- Descriptive accounts from students, companions, and clients available
- Experience and attitude feedback recorded in report

Rurality:

- Limitations due to travel expenses--reimbursement of mileage may constrain rural use
- Rural areas would benefit from this, but companion services, numbers of home-bound elderly, senior companions, and students may be too limited
- Funding and expertise in screening, matching, and supervising may be lacking in rural communities

Other:

- Project valuable in several respects
- Funding could support individualized learning through a class
- Funding necessary to sustain project
- Overall a relevant and good program
- Unclear student job description--students could have written their own learning objectives
- Clearer definitions of students' visits needed
- Seemed more a social visit with some reference to community resources
- Orientation process was confusing--some students attended orientation, others seminars, others neither--consistent standardized orientation is recommended
- Exposure to both the active and well senior and frail elderly would have given student the whole perspective
- A more detailed evaluation from senior companions and home-bound elderly would have been helpful

Materials May Be Obtained From:

Robert G. Bringle
Purdue University at Indianapolis
1125 East 38th Street, PO Box 647
Indianapolis, IN 46205
(317) 274-6753

Program Descriptors: aging process, cultural, frail elderly, home, NCOA, psychology, senior companion, social support

MINORITY ALZHEIMER'S CAREGIVERS: REMOVING BARRIERS TO COMMUNITY SERVICES
A TRAINING MANUAL

[1989(p), c]

Developer:

- J. Neil Henderson
- Lilia Guerra Alexander
- Marcela Gutierrez Mayka
- National Resource Center on Alzheimer's Disease
  Suncoast Gerontology Center
  University of South Florida Medical Center

Program Category:

- Caregiver Education

Abstract:

The Minority Alzheimer's Caregivers: Removing Barriers to Community Services has been developed by the National Resource Center on Alzheimer's Disease as a guide and resource tool for training minority caregivers of Alzheimer's patients. It was produced to assist State Units on Aging in implementing education and training programs which are designed to enable ethnic minority Alzheimer's disease caregivers to utilize community resources. This manual attempts to redress the under-utilization of community resources by minority Alzheimer's disease caregivers and their linguistically and culturally unique needs. This program targets those professionals or non-professionals with experience or specific interests in ethnic aging, but contains information and skills training about ethnic aging regardless of the trainers' cultural or ethnic backgrounds.

Ten lessons of time lengths varying from ten minutes to two hours are planned and scripted. The manual is organized into six sections including: basic information on Alzheimer's disease; how culture and ethnicity impact the aging process (through case studies to stimulate discussion); format of Caregiver Lesson Plans (helpful training methods and ideas for trainee recruitment); the Ten Caregiver Lesson Plans (instructions on content, exercises, group activities, and handouts); material for trainer self-evaluation; and the Appendices (useful resources). Charts, reprints, outlines, care plans, surveys, evaluations, bibliography, and other helps are appropriately incorporated into the text.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Health care issues/health care professionals
- Chronic illness and/or senile dementia
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills

Setting:

- Developed for any setting

Minority:

- Minority component/version (Black, Asian, Native American, Hispanic)

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of Alzheimer's disease
- Knowledge of aging
- Knowledge of community resources
- Public speaking
- Teaching
- Ethnic/minority interest or background
- Social worker
- Nurse
- Health educator

Suggested Resources/Professionals:

- Health care professionals

Collaborative Organizations:

- Senior center
- Nursing home
- Older adult organization

- Hospital
- Day care
- Religious facility
- Community organization
- Government agency
- Alzheimer's Association Chapters or Alzheimer's Disease Centers

Materials and Costs:

Facilitator/trainer/leader manual	$20.00
Camera ready handouts	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Program description	Included
Administrative forms	Included
Total pages of materials (approx)	106

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- Self-report of attitude and behavior change
- Pretest/post-test
- Trainer evaluation

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Susan Quinn
National Resource Center on Alzheimer's Disease
Suncoast Gerontology Center
University of South Florida Medical Center
Health Sciences Center
12901 Bruce B. Downs Blvd., MDC Box 50
Tampa, FL 33612-4799
(813) 974-4355

Program Descriptors: adult education, aging process, Alzheimer's Association, Alzheimer's disease, AoA, Asians, Blacks, care plan, culture/ethnic, dementia, family, family dynamics, health care professional, Hispanics, minority, Native American, resources, service organizations, state unit on aging, training

PRACTICAL HELP FOR THOSE CARING FOR AN ELDERLY PERSON IN THE COMMUNITY

[1987(p)]

Developer:

- New York State Office for the Aging

Program Category:

- Caregiver Education

Abstract:

Practical Help for Those Caring for an Elderly Person in the Community is a six-session course developed by the New York State Office for the Aging in recognition of the vast amount of care family, friends, and neighbors provide to the elderly. The course was written to help not only those currently involved in a caregiving role with an elderly person and also potential caregivers, but also for the elderly who want to learn more about themselves, their peers, and the aging process.

The overall objectives of the course are to help participants increase their understanding and knowledge of the aging process, better understand the emotional reactions and needs of older people, learn to deal more effectively with their own as well as their aged relatives' needs, acquire personal care skills to help in their caregiving roles, acquire greater knowledge of community resources and their functions, and be better able to develop and express ways to assist themselves and their aged relatives in maintaining an active and productive way of life. The major theme of the program is that caring for frail older persons is a difficult endeavor which can be facilitated by skill development and problem exploration in a group setting.

The six sessions are two hours each and cover such topics as (1) Increasing Your Understanding of the Psychological Aspects of Aging; (2) Medical Problems of Aging; (3) Improving Communication Between the Family and Older Person; (4) Availability and Utilization of Community Resources; (5) Personal Care Skill Development for the Informal Caregiver; and (6) Assessing the Situation/What Does the Future Hold? The objectives

of these are to explore approaches for dealing with the feelings and situations the participants may experience in the future, to integrate the material presented throughout the course, to explore advocacy roles regarding elderly issues, and to introduce concepts of "peer support groups" and "mediating structures."

An instruction guide for course leaders includes session outlines with lists of handouts, materials, and suggestions for outreach and for providing respite to participants.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress
- Emergency Medical Action

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Basic knowledge of aging process and problems of aging
- Strong group facilitation
- Organizational
- Knowledge of community resources
- Nurse
- Social worker

Suggested Resources/Professionals:

- Guest speakers
- 3x5 file cards
- Name tags
- Participants' folders with paper
- Material for five charts

Collaborative Organizations:

- Area Agency on Aging
- Community organization

Materials and Costs:

• Participant handbook/manual	Included
• Facilitator/trainer/leader manual	No Cost
• Camera ready handouts	Included
• Sample news release(s)	Included
• Program description	Included
• Administrative forms	Included
• Total pages of materials (approx)	140

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:
- New York State Office for the Aging

Type of Evaluation:
- Pretest/post-test

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- This program has been adapted for and used most frequently for Alzheimer caregivers. A sister program has been developed: "Caring for an AIDS Patient at Home." It uses many of the techniques and skills of the above program.

REVIEWER COMMENTS

Community Characteristics:
- Program emphasizes use of Area Agency on Aging as co-sponsor and resource

Target Audiences:
- Ability to complete session reading assignments
- Participants would not need high degree of sophistication

Time Intensity:
- Program easy to implement
- Manual very comprehensive with many examples

Content Specialist/Skills:
- Facilitator with knowledge in gerontology
- Good organizational skills
- General understanding of group process
- Health professional needed to conduct personal care skills

Evaluation:

- Pre-/post-test design included

Other:

- Basic overview of caregiving issues is provided
- Materials need to be updated--bibliography refers to materials published in mid- to late-seventies
- Instructor's guide is difficult to get through
- Name of the state where manual was developed needs to be removed from camera ready copy of handouts for others to use
- Evaluation instrument is not very adequate
- Program is for a community without previous caregiving education
- It is a very basic general program

Materials May Be Obtained From:

Liz Kinnear
County of Suffolk, Department of Health Services
225 Pablo Drive East
Hauppauge, NY 11788
(516) 348-2765

Program Descriptors: ADL, aging process, arthritis, communication skills, dementia, diabetes, emergency plans, family, family dynamics, finances, grief, health promotion, hearing, home, hypertension, incontinence, legal, meals, mental health, nursing home, nutrition, peer support, personal care, relaxation, resources, skin care, stress, stroke, vision

PREVENTION AND MANAGEMENT OF AGGRESSIVE BEHAVIOR IN THE ELDERLY

[1988(p), c]

Developer:

- Marilyn Cleland
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Caregiver Education

Abstract:

Prevention and Management of Aggressive Behavior in the Elderly was designed to introduce professional and family caregivers to underlying problems, issues, and approaches to manage and cope with aggression successfully.

The training outlined can best be accomplished in one, two-hour or two, one-hour sessions. Issues addressed are the scope of the problem; description of aggressive behavior; underlying problems as predisposing factors to aggressive behavior, such as age-related sensory changes, age-related health problems, environmental factors, and caregiving factors; the five stages of the crisis cycle - triggers and warning signs, escalation, unavoidable physical/verbal/sexual behavior through the use of escape maneuvers, restraints, and priorities for safety; and impact of aggression on caregivers.

Upon completion of the workshop, caregivers will be able to identify the underlying problems that predispose elderly to aggressive behavior, identify types of aggression, list the five stages of the crisis cycle, identify possible warning signs that a person has been triggered and may escalate to an aggressive act, list approaches a caregiver can use to defuse a situation, demonstrate appropriate evasive maneuvers, discuss the physical and emotional impact of the use of restraints on elderly, and list priorities, in order of importance, that they need to apply when dealing with physically aggressive people.

The program handbook supplements the two training videotapes, "Before the Going Gets Rough: Prevention of Aggressive Behavior in the Elderly" and "After the Going Gets Rough: Management of Aggressive Behavior and Its Consequences."

Neither the videotapes nor handbook alone are intended to replace formal training provided by professionals experienced in the care of aggressive elderly.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Coping with stress

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Experience with difficult behaviors
- Knowledge of aging issues
- Psychiatrist
- Nurse
- Psychologist

Suggested Resources/Professionals:
- VCR
- Monitor

Collaborative Organizations:
- Nursing home
- Hospital
- University

Materials and Costs:

Participant handbook/manual	$20.00
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Video rentals (each)	$65.00
Video tape purchase price (30 min. each)	$250.00
Special package available	
Quantity reductions available	
Total pages of materials (approx)	76

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Type of Evaluation:
- Pretest/post-test

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- The program is geared to health care professionals, as well as families
- Legal and financial issues are discussed relative to restraints and institutionalization
- Manual can be used alone but is most helpful in conjunction with the suggested video tapes, "Before the Going Gets Rough" and "After the Going Gets Rough" (purchase price - $250, rental - $65 each, including handbook)
- Video tapes cover many topics the manual does not

REVIEWER COMMENTS

Community Characteristics:

- The program requires a sponsoring agency to provide continuing consultation and support, preferably a nursing or mental health agency due to content
- Because of the medical and psychiatric orientation, appropriately trained staff would be needed to understand the manuals and connect them to the training

Target Audiences:

- Participants with physical agility and strength due to the basic maneuver training involved
- Hearing and visual deficits should be considered because of the video tape presentation

Time Intensity:

- The sponsoring agency would be responsible for actually putting together the planning of this program
- Materials and suggestions for pre-/post-tests, content outlines, handouts, and a resource list are provided
- It would probably take two to four months to plan and advertise
- To execute the program, the authors recommend either a one-hour session or two, one-hour sessions

Content Specialist/Skills:

- A nurse or mental health professional with specialized knowledge in aging and caregiving is recommended
- The handbook is written at an advanced level and uses considerable jargon
- Group leadership, teaching, and public speaking skills would also be helpful
- The person who is conducting the group should also have the ability to demonstrate maneuvers

Evaluation:

- A pre-/post-test is given to the participants to assess what they learned

Other:

- Supportive material is provided
- It could be overwhelming for participants to deal with all the information available in a one-hour session
- The handouts do a good job of illustrating the different maneuvers for dealing with aggressive behavior
- The program may not allow adequate time for practicing the maneuvers
- The manual is extremely extensive and it would take considerable reading to pull all the information together, especially if the leader does not have a mental health or nursing background

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: aggression, aging process, crisis, decision making, dementia, difficult behaviors, emergency plans, environment, epilepsy, family, family dynamics, grief, health care professional, hospital, medication, nursing home, restraints, safety, sexuality

A SERIES OF TRAINING MODULES FOR INFORMAL CAREGIVERS

[1987(p)]

Developer:

- Kristine Bursac
- Cynthia Mick
- Arizona Long Term Care Gerontology Center
  College of Medicine
  University of Arizona

Program Category: Caregiver Education

Abstract:

A Series of Modules for Informal Caregivers was designed to provide education and training opportunities to strengthen and enhance the capabilities of the informal caregiving network, i.e., family and friends of frail elderly.

The program is divided into three modules, the objectives of which are to (1) enhance informal caregivers' knowledge of normal and abnormal aging processes; (2) improve the basic home nursing skills of informal caregivers; and (3) provide information and recommendations designed to decrease caregiver stress and burnout.

Each module is divided into a series of two-hour sessions to be presented weekly. Module I consists of three sessions; Module II, five sessions; and Module III, six sessions. Session materials include guidelines for lectures, discussions, sharing of ideas, experiential exercises, and skills training, plus copy-ready handouts, all of which are provided to expand upon the basic subject matter.

Issues addressed include normal physiological and psychological changes of aging, common chronic illnesses, common emotional responses to chronic illness, getting ready for home care, moving and transferring a dependent person, caring for a bedbound person, using medicines wisely, improving observation and recording skills, managing physical conditions and handling emergency situations, coping with stress, physical exercise and relaxation techniques for stress reduction, physical fitness resources, nutrition and health-social support and wellness, communicating openly, managing the health care maze, and community resources for the elderly.

Also provided in the manual are detailed outlines for program preparation and implementation, lists of references and suggested readings for each module, session review questions, participant evaluations, module content guides, sessions at a glance, and session overviews.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress
- Emergency care

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Thorough knowledge of program materials
- Enthusiasm
- Organizational skills
- Health care professional
- Nurse
- Social worker

Suggested Resources/Professionals:

- Additional materials such as pamphlets, etc., to be ordered in advance as instructed in manual
- Demonstration equipment such as bed (hospital or single raised on blocks), wheelchair or armchair, etc.
- Small items such as toothbrush
- Small medical equipment such as stethoscope
- Support of local service agencies and health care professionals

Collaborative Organizations:

- Community organization
- Local service agencies

Materials and Costs:

Facilitator/trainer/leader manual	$30.00
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Total pages of materials (approx)	277

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Arizona Long Term Care Gerontology Center
  College of Medicine
  University of Arizona

Type of Evaluation:

- Participant evaluation

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Community Characteristics:
- Sponsor may be hospital, home health agency, or some medical/health related organization
- Five sessions deal with home care skills requiring nursing personnel to teach

Target Audiences:
- People who are in caregiving roles or see themselves taking on such a role soon
- Program geared toward person providing direct care

Time Intensity:
- Quite intensive to plan and execute if all 14 sessions offered
- Each module very complete with step-by-step assistance and guidelines
- If professionals used to conduct session, most time for coordinator would involve working with these community professionals

Content Specialist/Skills:
- Program coordinator not be required if community professionals were used to teach sessions
- Person organizing sessions must have knowledge of community professionals

Evaluation:
- Course evaluation at end of each module
- Evaluation involves participants rating helpfulness of information presented, methods used, and instructors' abilities
- Test is provided that could be used when first module is presented and at completion to assess knowledge gained

Other:

- A very complete manual
- If program presented in rural area where some specialists unavailable and facilitator is uncomfortable with topic, sessions could be deleted
- All 14 sessions do not necessarily have to be used

Materials May Be Obtained From:

Kristine Bursac
Arizona Long Term Care Gerontology Center
1807 East Elm
Tucson, AZ 85719
(602) 626-4854

Program Descriptors: aging process, Alzheimer's Association, Alzheimer's disease, arthritis, bathing, cardiovascular system, communication skills, dementia, depression, diabetes, emergency plans, exercise, first aid, health care professional, hearing, home, hypertension, incontinence, lifting/transferring, medication, nursing skills, nutrition, personal care, pulmonary system, relaxation, resources, self care, sensory deprivation, stress, stroke, training, university, vision

A TIME OF NURTURING

[1988(p), c]

Developer:

- Arizona Long Term Care Gerontology Center
  College of Medicine
  University of Arizona

Program Category: Caregiver Education

Abstract:

A Time of Nurturing was designed to develop a model program for initiating and sustaining educational/support groups for primary and secondary informal caregivers. The resulting network of support groups would then serve as a structure for ongoing information dissemination.

The project integrates (1) techniques for the gradual transfer of leadership to the group's participants; (2) variation of meeting content according to group needs; (3) respite care for dependent relatives during group meeting times; (4) a "grass roots" neighborhood approach; (5) "booster sessions" to promote continued participant enthusiasm; and (6) an intergroup information sharing network. The objectives of the project are to prevent or delay institutional placement of care receivers and to enhance the quality of life for both caregivers and care receivers.

The program is divided into eight, two-hour sessions addressing such issues as aging, specific diseases and common reactions to illness and loss, particular physical caregiving skills (e.g., transferring, proper body mechanics, giving bed baths, etc.), community resources of potential assistance to the caregiver, emotional needs of care receivers, communication skills, taking care of one's self, and the nature and effects of stress and techniques for coping with excessive stress. In addition to providing information to improve caregiver skills, the group sessions are also intended to allow ample opportunities for participants to share and work through emotional reactions to their situations.

The facilitator's manual includes suggestions on setting up and running the program, session outlines, copy-ready handouts, a detailed guide to services, participant evaluation forms, and suggestions for follow-up sessions and staying in touch with caregivers.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Living arrangements
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Coping with stress

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Experience in group work, particularly in working with elderly persons and their families
- Solid background in gerontology
- Skill in providing non-judgmental support
- Understanding of content illnesses
- Current knowledge of community resources
- Health care professional
- Gerontology specialist
- Nurse
- Social worker

Suggested Resources/Professionals:

- None Specified

Collaborative Organizations:

- Community organization
- Hospital
- Health care facilities

Materials and Costs:

Participant handbook/manual	$6.00
Facilitator/trainer/leader manual	$10.00
Camera ready handouts	Included
Sample participant evaluation	Included
Final report	Unlisted
Program description	Included
Administrative forms	Included
Total pages of materials (approx)	150

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Self-report of attitude and behavior change
- Participant evaluation

Evaluation Results Available From:

- Contained Within Program Materials

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Professional necessary to facilitate each session
- Program best facilitated in informal setting to allow caregivers to become cohesive as a group and feel comfortable exploring feelings

Target Audiences:

- Good communication skills
- Ability to read and write to complete exercises

Time Intensity:

- Very time intensive for planner
- If planner was within an agency devoted to support group development, time may be reduced
- Difficult to manage for planner with other commitments
- Great deal of time to market, identify participants, prepare curriculum and handouts, and conduct follow-up session
- Depending on planner's expertise, s/he may be responsible for facilitating groups
- Additionally, a drop-in feature may require planner to be available for individuals to visit and talk

Content Specialist/Skills:

- Facilitator of group must specialize in leadership, group management, counseling, aging, community resources, and relaxation techniques
- Non-judgmental attitude
- Able to facilitate group process well
- Nurse to conduct session on transferring skills

Evaluation:

- No formal evaluation conducted
- Informal evaluations done based on subjective experiences of participants
- Questionnaire sent to participants following program to determine if members' support had increased and how satisfied they were with support received

Other:

- In rural areas, transportation may be an issue
- Respite may need to be provided
- Program provides high degree of interaction in which each individual explores his/her feelings, expresses thoughts about caregiving, and applies knowledge learned in sessions to own particular situation

Materials May Be Obtained From:

Randall Scott
Arizona Long Term Care Gerontology Center
1807 East Elm
Tucson, AZ 85719
(602) 626-4854

Program Descriptors: ADL, aging process, AoA, communication skills, depression, exercise, frail elderly, grief, health care professional, hearing, home, memory, mental health, peer support, personal care, relaxation, resources, self care, sensory deprivation, social support, stress, support group, university, vision

TRAINING THE ELDERLY AND THEIR CAREGIVERS IN THE HOME (TEACH)

[1990(p)]

Developer:

- Mary Hilliard
- Leesa Gibson
- Laura Livingston
- Florida Department of Health and Rehabilitative Services
- Department of Veterans Affairs

Program Category:

- Caregiver Education

Abstract:

Training the Elderly and Their Caregivers in the Home (T.E.A.C.H.) was prepared to help caregivers of the frail elderly master techniques involved in providing personal care. The purpose of the program is to develop and implement a service delivery system to prevent or delay institutionalization of medically dependent elderly. Because there is increasing evidence that nursing home placement frequently occurs when the well-being of the caregiver is in jeopardy, caregiver education and training such as is available through this program is increasingly being considered as a viable option to sustain and enhance the capacity of caregivers.

The program consists of 51 modules to be used for training in the areas of (1) dressing and grooming; (2) feeding and nutrition; (3) how to check a person's health; (4) moving and exercising a person; (5) bowel and bladder care; and (6) communication and sensory loss. Specific topics addressed include bathing, dental and denture care, grooming and hygiene, making an occupied bed, special diets, medication management, basic nursing skills, body mechanics, health and safety for older persons, eye care, hearing aid care, dealing with disorientation, using protective devices and restraints, etc.

The program is not formatted for group training, but rather offers caregiver and care receiver clients individualized training within the home. The training is conducted by a nurse or physician who provides demonstrations and verbal instructions, affording the opportunity for reinforced learning through supervised practice.

The participant manual contains fully illustrated, clearly printed materials with which the caregiver may periodically review the skills demonstrated during training. The program was developed by the Florida Department of Health and Rehabilitative Services and supported by the Department of Veterans Affairs, the Robert Wood Johnson Foundation, the Department of Health and Human Services' Administration on Aging, and the Health Care Financing Administration.

Curriculum Content:
- Home safety
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Health promotion for the caregiver
- Health promotion for the care receiver

Setting:
- Developed for rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Home nursing
- Professional health care background
- Instructional
- Nurse
- Physician

Suggested Resources/Professionals:
- Health care professionals
- Personal care supplies, such as, basins and bathing supplies, bed pan, blood pressure gauge, thermometer, lancet and blood test strips, syringe with needle, etc. (as specified in manual)

Collaborative Organizations:
- Hospital
- University
- Home health agencies
- Public health agencies
- Government agencies

Materials and Costs:

Participant handbook/manual	$35.00
Program description	Included
Total pages of materials (approx)	438

Program Replication:
- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- Florida Department of Health and Rehabilitative Services
- Department of Veterans Affairs
- Robert Wood Johnson Foundation
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- Checklist of participant skills

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:

- One copy of program free to state agencies
- $35 fee represents copying costs
- As an in-home program, it is appropriate for any community
- In light of one-on-one approach, it will work within minority households (given professional skilled in appropriate language and culture)

REVIEWER COMMENTS

Community Characteristics:

- Though may be best in rural areas that lack resources, professionals to train may be in short supply
- Urban areas with staff and time may facilitate this
- Collaborate with hospitals, public health departments, home health agencies, or area agencies on aging
- Access to institutions with students, facilities and teaching expertise and resources

Target Audiences:

- Large number of home-bound frail elderly in need of physical assistance and care
- Caregivers must be literate and physically capable of delivering skilled care
- Unclear how caregivers were identified or recruited

Time Intensity:

- Execution, organization, and coordination would require time
- Most time spent with demonstration and review of skills at caregiving site
- Continued supervision and evaluation require further time

Content Specialist/Skills:

- Arrangements, planning, organization expertise in nursing and medicine
- Physical, technical procedures, care teaching
- Nurse needed for overall evaluation, though LPN could review checklist
- Unrealistic for especially a physician or possibly even a nurse to undertake that kind of time for intense one-on-one teaching

Evaluation:

- Program itself not evaluated
- Descriptive analysis of clients and caregivers available in manual

Rurality:

- Probable lack of available staff, time, and funds, even with use of rural hospital as sponsor
- In rural areas, often families do not seek outside help and care--instead directly admit patient to nursing home
- Transportation another issue in rural areas, especially for students
- Very unrealistic that a physician would teach in homes in rural areas

Other:

- Content basically accurate
- A lot of how-to's
- Several places where it would be necessary to add the wearing of gloves for infectious diseases (particularly handling any type of bodily secretions)
- Manual extremely detailed, both in teaching and checklist components
- Elderly may find concentrating on such detail difficult
- May be too detailed

Materials May Be Obtained From:

Abigail Walters
Aging and Adult Services - HRS
1321 Winewood Boulevard
Tallahassee, FL 32301
(904) 488-2650

Program Descriptors: ADL, AoA, case management, disabled, foot care, health promotion, home, incontinence, lifting/transferring, meals, medication, nursing skills, nutrition, personal care, physician, training, Veterans Administration

VOLUNTEER INFORMATION PROVIDER PROGRAM (VIPP)

[1986(p), c]

Developer:

- Share Decroix Bane
- Burton P. Halpert
- Center on Aging Studies
  University of Missouri-Kansas City

Program Category:

- Caregiver Education

Abstract:

Volunteer Information Provider Program (VIPP) is designed to recruit volunteers from existing networks in the community, such as Extension Home-Maker Clubs, Shepherd's Center participants, Retired Senior Volunteer Programs, Senior Companion Program, churches, etc., and train those volunteers to share information with caregivers of elders. Objectives are for volunteer information providers to help caregivers (1) understand the aging experience better; (2) deal with the stress of caregiving; (3) reduce communication problems between the caregiver and elderly person; (4) learn new techniques in providing personal care to the elderly person; (5) learn how to use medicines wisely; (6) deal more effectively with health care resources in the community; and (7) be able to identify and access community resources that can help the elderly person.

An instructor's manual, designed for individuals who do not have a particular expertise in aging or adult education, provides the trainers with suggestions for implementing the program.

The resource manual is to be used by volunteers and caregivers largely for self-learning and continued reference. The training period is structured in three (3) one-day training sessions with an approximate time frame of 9:00 a.m. to 4:00 p.m.

The resource manual contains a list of likely community resources and a list of organizations and addresses for additional resource information.

The instructor's manual contains an appendix with examples of materials that can be used in publicizing the program, developing a log book, keeping a diary, etc.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Medication management
- Providing personal care (i.e., transferring, bathing)
- Death and grief
- Sensory deprivation and the communication process
- Decision making/problem solving/communication skills
- Coping with stress

Setting:

- Developed for rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of aging and caregiving issues and of community resources
- Teaching
- Social worker
- Nurse
- Teacher

Suggested Resources/Professionals:

- Easily obtainable materials such as paper, pencils, etc. as indicated in the program manual

Collaborative Organizations:

- Support and involvement of community aging networks and volunteers from existing networks
- Extension Homemaker clubs
- Service clubs
- Shepherd's Centers
- Retired Senior Volunteer Program
- Senior Companion Program
- Churches
- AAA information and referral

Materials and Costs:

Participant handbook/manual	$10.00
Facilitator/trainer/leader manual	$7.00
Camera ready handouts	Included
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Handling charges/mailing	$2.00
Total pages of materials (approx)	289

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test
- Evaluation by program leaders during debriefing session
- Evaluation questions contained in manuals

Evaluation Results Available From:

- See "Materials May be Obtained From"

Halpert, B.P. (1988). Volunteer Information Provider Program: A Strategy to Reach and Help Rural Family Caregivers. The Gerontologist. 28, 2.

Halpert, B.P.& Sharp, T.S. (1989). A Model to Nationally Replicate a Locally Successful Rural Family Caregiver Program: The Volunteer Information Provider Program. The Gerontologist. 29, 4a.

Selected Developer Comments:

- Program has been conducted with Black and Hispanic minorities

REVIEWER COMMENTS

Community Characteristics:

- Not addressed by reviewer

Target Audiences:

- Volunteers need to be highly motivated to help others
- Program requires participants who really want to learn these skills and understand how to teach other people
- Volunteers need to be literate and possess excellent communication skills

Time Intensity:

- Very time intensive to organize
- Need to identify key agencies and referral programs, as well as those programs that work with and train volunteers

Content Specialist/Skills:

- Programming, group leadership, management, and specialized knowledge of the community
- Skilled at working with community organizations to bring all the agencies together
- Ability to understand resource management and community resources available
- Knowledge of the aging process
- Given this type of training, supervision by appropriate professionals may be warranted

Evaluation:

- Two informal approaches are used
- Volunteer diary to record the basic concepts of this training, how to perform specific tasks, understand the information, their feelings about working with families, and actual work with the families
- Caregivers are asked to evaluate the volunteers on the information they provided, how much it helped initially, and how much it helped a month later

Other:

- Program focuses heavily on using an existing volunteer network
- Looking for single volunteer organization as an entre into a rural community might be limiting
- Coordinator needs training to implement program--if well trained, had continuous follow up and a contact for questions, problems, and issues--the program could be successful (given the complexity of the material)
- Program is workable but structure must be there to support volunteers throughout their work

Materials May Be Obtained From:

Burton P. Halpert
Center on Aging Studies
University of Missouri - Kansas City
5245 Rockhill Road
Kansas City, MO 64110
(815) 235-1751

Program Descriptors: adaptive equipment, ADL, adult education, aging process, alcohol, AoA, bathing, cardiovascular system, communication skills, consumerism, Cooperative Extension, dental care, frail elderly, grief, home, incontinence, lifting/transferring, medication, personal care, physician, relaxation, resources, rural, safety, self care, sensory deprivation, skin care, social support, stress, stroke, substance abuse, training, university, vision, volunteer

WELLSPRINGS:
A TRAINING PROGRAM FOR FAMILY CAREGIVERS - CAREGIVER SUPPORT PROGRAM (CSP)

[1989(d), c]

Developer:

- Amanda Smith Barusch
- University of Utah
  Graduate School of Social Work
  Caregiver Support Project

Program Category:

- Caregiver Education

Abstract:

Wellsprings: A Training Program for Family Caregivers is presented by the Caregiver Support Project, established at the University of Utah in September 1986 with funding from the Administration on Aging (OHDS Grant No. 90AM0221). The goal of the project has been to develop and evaluate interventions designed to reduce the stress experienced by an elderly caregiver.

Wellsprings is a six-session training program combining didactic presentation with related exercises. Each two-hour session includes a 15-minute break and a relaxation exercise. All sessions include homework assignments.

Session topics include normal aging vs. the effects of disease; physiological changes with age; cognitive and behavioral changes associated with aging; emotional reactions to aging and how to cope; community resources; assertiveness training; medication management; relaxation techniques; legal devices including conservatorship, guardianship, durable power of attorney, and living wills; sources of financial assistance such as Medicare, Medicaid, and private insurance; coping with criticism, negative assertion, and negative inquiry; grieving; communication skills involving compromise; and exercise and self care for the caregiver.

The Wellsprings manual includes evaluation materials on the Caregiver Support Project, information on setting up the sessions, training guidelines, curriculum materials, listings of community resources, organizations, and resource materials.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress
- Hospice

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Organizational
- Knowledge of aging and caregiving
- Management
- Knowledge of legal issues and community resources
- Communication
- Nurse
- Social worker
- Lawyer

Suggested Resources/Professionals:

- Guest speakers

Collaborative Organizations:

- Community organization
- Service organization

Materials and Costs:

• Facilitator/trainer/leader manual	Unlisted
• Camera ready handouts	Unlisted
• Final report	Unlisted
• Program description	Unlisted
• Brochure/pamphlet	Unlisted
• Materials unavailable until 1991	Under $15
• Total pages of materials (approx)	169

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test

Evaluation Results Available From:

- Contained Within Program Materials

Selected Developer Comments:

- For rural use phone network is under review as alternative to group meetings
- Has been conducted with Asian minority
- Sage will publish program in 1991 with additional components as follows: personal care, home safety, guide to physicians, how to evaluate caregiver programs
- For information on program content, please contact the developer using information given in "Materials Can Be Obtained From."

REVIEWER COMMENTS

Community Characteristics:

- Identification needed for caregiver education by a group of professionals or agencies that would be skilled in providing the training and support services such as respite and transportation

Target Audiences:

- Individuals with a commitment to attending the sessions
- Majority of time would be spent on marketing the program, contacting referrals, and educating potential participants of the availability of the program

Time Intensity:

- Very time intensive to plan and execute
- Majority of time must be spent on marketing program, contacting referrals, and educating potential participants of the program's availability

Content Specialist/Skills:

- Background in either human services, social work, education, or gerontology
- Ability to identify needs, implement programs, and organize resources
- Basic working knowledge of the elderly and caregivers, as well as resources available in the community
- Guest speakers recommended

Evaluation:

- Included a pre-/post-test with follow-up interviews

Other:

- Program wonderful, very well evaluated, and would be very successful in a rural area
- Draws on a lot of different professionals who should be accessible in most rural communities
- Sponsoring agency would need to consider providing respite and transportation

Materials May Be Obtained From:

Amanda S. Barusch
The University of Utah
Social Work Building
Salt Lake City, UT 84112
(801) 581-4428

Program Descriptors: adult day care, aging process, AoA, Asians, cardiovascular system, cognition, communication skills, community resources, decision making, dementia, emergency plans, exercise, family, family dynamics, finances, frail elderly, health promotion, hearing, home health, hospice, IADL, legal, medication, memory, nursing home, psychology, relaxation, resources, self care, self esteem, service organizations, stress, training, university

WHEN DEPENDENCY INCREASES: "BEST WISHES EDITH AND HENRY"

[1984(p), c uk]

Developer:
- Vicki L. Schmall
- Ruth Stiehl
- Oregon State University Cooperative Extension Services

Program Category:
- Caregiver Education

Abstract:

When Dependency Increases is designed to address the concerns and dilemmas which more and more adults are facing about their aging relatives. These adults need information in order to make effective decisions.

This workshop, which features the dramatic presentation, "Best Wishes Edith and Henry," is intended to give adults a place to discuss these concerns openly in a non-threatening setting. "Best Wishes Edith and Henry" is presented to motivate and encourage the viewer to see the concerns of other family members and to consider the impact of decisions on everyone while solving problems.

Program objectives are to (1) inform families about how social trends have influenced the role of the family as caregiver; (2) acquaint adult children with some of the lifestyle changes which might be anticipated if a parent becomes dependent; (3) acquaint adult children with financial concerns families frequently face when a parent becomes dependent; (4) characterize and promote an effective "helping relationship" between the family and the aging parent at the difficult time of lifestyle change; (5) help families understand the serious impact of illness and long-term care; (6) suggest specific decision-making skills; (7) help families find and use local, regional, and national resources which can provide accurate information and answers to questions regarding Medicare, Medicare supplemental policies, health care options, long-term care alternatives, estate planning, government entitlement, etc.; and (8) help families understand and communicate to parents the need for estate planning, preparation of wills, letters of last instructions, etc.

The workshop guide (facilitator manual) includes program objectives; how to prepare for conducting the workshop in regard to material selection, presentation techniques, and utilizing local resources; workshop activity guides; script for slide/tape presentation; masters for overhead transparencies; and participant handouts. The format for presentation of the program is left open to the needs of the user.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Living arrangements
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Coping with stress

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Teaching experience
- Thorough knowledge of program materials and community resources
- Social worker
- Nurse

Suggested Resources/Professionals:

- Slide projector and screen
- Overhead projector and transparencies
- Slide or video presentation including "Best Wishes Edith and Henry," and additional publications to be ordered as instructed in the program manual
- Easily obtainable materials such as pencils, etc. as indicated in the manual

Collaborative Organizations:

- Cooperative Ext/4-H
- Senior center
- Older adult organization
- Community organization
- Area Agency on Aging
- Other service agencies

Materials and Costs:

• Facilitator/trainer/leader manual	$67.50
• Camera ready handouts	Included
• Camera ready overheads	Included
• Slides with audiotape (15 min.)	$17.00
• Script	Included
• Sample news release(s)	Included
• Administrative forms	Included
• Slides/audiotape available only with purchase of package	
• Special package available	
• Total pages of materials (approx)	155

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- American Council of Life Insurance
- Health Insurance Association of America

Type of Evaluation:
- Attendance count
- Self-report of attitude and behavior change
- Pretest/post-test

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- Program has been conducted with minorities, Native Americans (modifications addressed cultural issues).
- This program is one of seven in a series.
- Program dependent on slides and overheads.
- For program content information, please contact developers at (503) 737-1014.

REVIEWER COMMENTS

Community Characteristics:
- Accessible human service personnel
- Without available services in sponsoring community, there should be a strong liaison with a larger community with caregiver services

Target Audiences:
- This program geared toward individuals providing care for a parent rather than a spouse or other relative

Time Intensity:

- May require lead time of three to four months to inform and involve other agencies
- May also require four to six weeks to advertise

Content Specialist/Skills:

- A variety of specialists: legal, financial, and insurance issues
- Persons knowledgeable in content areas should either facilitate, co-facilitate, or at least be available during program to answer questions
- The diversity of topics requires the facilitator to have a broad knowledge base

Evaluation:

- None was included

Other:

- Manual contains excellent information on publicity of program
- Program has some well-written, informative pamphlets
- Program could be difficult to conduct in rural areas if community lacks appropriate resource persons
- Program is flexible and conforms to needs of target audience
- Table of contents rather sketchy
- Program would provide a very interactive workshop
- Program encourages decision making on the part of families without taking away their individual responsibility and privilege to make decisions--these are critical issues for rural communities

Materials May Be Obtained From:

Terry Allen
Oregon State University
Cooperative Extension Services
161 Milan Hall
Corvallis, OR 97331-5106
(503) 737-1014

Program Descriptors: communication skills, Cooperative Extension, decision making, family, family dynamics, finances, frail elderly, grief, resources

WHEN DEPENDENCY INCREASES: "THE DOLLMAKER"

[1987(p)]

Developer:

- Vicki L. Schmall
- Ruth Stiehl
- Oregon State University Cooperative Extension Services

Program Category:

- Caregiver Education

Abstract:

When Dependency Increases: "The Dollmaker" addresses the potential emotional and physical impacts of caregiving — isolation, loss of activities, deteriorated health and relationships, and death of a loved one. The primary thrust of the program is to establish guidelines for making caregiving decisions and reducing caregiver stress.

Program objectives include imparting to a family caregiver the following skills: (1) the ability to identify the sources of stress unique to providing care for an elderly family member; (2) the understanding of what it means to be a care manager as contrasted with a primary caregiver; (3) realization of the importance of valuing one's own personal needs; (4) how to set limits on one's role as a caregiver; (5) understanding the difficulties of coping with mental as opposed to physical changes in older persons; (6) the ability to relate caregiver self-care to the well-being of the care receiver; (7) knowledge of how to provide help while living at a distance; (8) the ability to make caregiving decisions based on objective assessments rather than on emotions or social pressures; (9) the ability to recognize symptoms of caregiver stress; (10) how to deal with guilt and other negative emotions; (11) understanding the factors which frequently account for differing expectations and perceptions of family members who live with or near the person needing care and those who live at a distance; (12) the ability to create a plan for reducing caregiver stress; (13) knowledge of caregiving support services available in the community, and (14) how to provide positive support to the primary caregiver.

The workshop guide (facilitator manual) includes program objectives; how to prepare for conducting the workshop in regard to material selection, presentation techniques, and utilizing local resources; workshop activity guides; script for slide/tape presentation; master for overhead transparencies; and participant handouts.

The format for presentation of the program is left open to the needs of the user.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Coping with stress

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Thorough knowledge of the program materials and of community resources to which families can turn for assistance
- Knowledge of caregiving issues and family dynamics
- Ability to handle emotionally-laden subjects and reactions
- Knowledge of aging issues
- Nurse
- Social worker

Suggested Resources/Professionals:
- Slide projector and screen
- Overhead projector and transparencies
- Slide or video presentation including, "The Dollmaker"
- Additional publications to be ordered as instructed in the program manual
- Easily obtainable materials such as pencils, etc., as indicated in the manual

Collaborative Organizations:
- Cooperative Ext/4-H
- Area Agency on Aging
- Other service agencies

Materials and Costs:

Facilitator/trainer/leader manual	$67.50
Camera ready handouts	Included
Camera ready overheads	Included
VHS video tape (20 min)	
- Only with purchase of other materials	$17.00
Script	Included
Sample news release(s)	Included
Administrative forms	Included
Additional participant handouts (each)	$.75
Special package available	
Total pages of materials (approx)	156

Program Replication:
- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- Meyer Memorial Trust
- Oregon State University Extension Service

Type of Evaluation:
- Attendance count
- Self-report of attitude and behavior change
- Pretest/post-test

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:

- For program content information, please contact the developer through the "Materials Can Be Obtained From" address and telephone number.

REVIEWER COMMENTS

Community Characteristics:

- Program provides opportunity for a group of agencies to join together and have a "show-and-tell" on community resources

Target Audiences:

- Visual abilities should be considered
- Good communication skills
- An informal and comfortable physical setting will facilitate broader attendance

Time Intensity:

- All materials for preparation and implementation included in manual
- Without a working knowledge of caregiving on the part of the facilitator s/he would need to invest time to become familiar with issues, handouts, and workbook

Content Specialist/Skills:

- Familiarity with program materials and community resources
- Ability to handle difficult moments in group situations
- Ability to provide support

Evaluation:

- Pre-/post-tests conducted to assess participants' attitudes and behaviors
- Attendance counts also used

Other:

- Possible to use program in one of three ways: (1) slide program only as a trigger to a resource session; (2) workbook only; or (3) both slide presentation and workbook session as planned
- Many formal services used in slide presentation
- In a rural area many of these services may not be available which could limit the effectiveness of the program
- Facilitator could possibly show how informal services could take the place of formal services
- Slide presentation triggers some very emotional issues--leader needs to be ready to deal with reactions
- Very good handout materials
- Respite care may be needed

Materials May Be Obtained From:

Terry Allen
Oregon State University, Cooperative Extension Services
161 Milan Hall
Corvallis, OR 97331-5106
(503) 737-1014

Program Descriptors: Alzheimer's disease, Cooperative Extension, family, family dynamics, mental health, nursing home, stress, training, university

YOU AND YOUR AGING PARENT (YYAP)

[1981(d), 1982(p)]

Developer:

- Elizabeth Ray
- Midland Area Agency on Aging

Program Category:

- Caregiver Education

Abstract:

You and Your Aging Parent provides guidelines for a community to use in presenting a series of workshops for children of aging parents/relatives. Professional assistance for conducting the workshop series is required from several community or county sources and human service agencies. The YYAP project will attempt to meet the following objectives: (1) to plan, develop, and present at least two special, and ten community-conducted workshop series which will increase understanding of participants of their aging relatives or friends; (2) provide the beginning of a support system to caregivers to relieve the burden of feelings of aloneness, anger, and guilt; (3) improve communication patterns with the elderly parents and others involved in their care; (4) help with problem solving, become aware of options in the community, develop an objective point of view, accept limitations, and try new approaches; and (5) provide practical instruction in caregiving to parents living with spouse, parents living with children, and parents living in institutions.

In general, the program includes five meetings. The first is with community leaders, most of them professionals, who are aware of the needs of the caregivers of the aging. The next four are two-hour sessions addressing the issues of (1) myths and losses of aging; (2) caring for parent(s) living in their own homes; (3) the problems involved when parent(s) live with a son/daughter; and (4) the problems involved when parent(s) live in a nursing home. Topics of discussion include supportive services, senile dementia, sensory loss, grief and loss, accidents and the elderly, the inadvisability of role reversal, dignity, privacy and control of life.

Materials include a program summary, minimal handouts, and brief subject outlines of major points to be covered for each discussion requiring guest speakers.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Home safety
- Roles/responsibilities/family dynamics

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Organizational
- Knowledge of aging issues, senior resources and services
- Counselors
- Nurses
- Health care professionals
- Social workers
- Gerontology specialists
- Mental health workers
- Nursing home administrators

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Hospital
- Community organization
- Health care facilities
- Social service agencies

Materials and Costs:

Camera ready handouts	No Cost
Sample news release(s)	Included
Program description	Included
Administrative forms	Included
Sample budget/budget guidelines	Included
postage and handling	$5.00
Total pages of materials (approx)	19

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Midland Area Agency on Aging

Type of Evaluation:
- Attendance count

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Almost any aging- or family-related agencies, including churches, may be able to offer this

Target Audiences:

- Participants needing these services
- Topics may be too narrow to reach a large audience

Time Intensity:

- If presenter has content knowledge or utilizes other specialists, program would not be time intensive
- Without background or experts, very time consuming since no in-depth content information is provided

Content Specialist/Skills:

- Background in aging and decision-making skills
- Substantial content knowledge because manual provides little information

Evaluation:

- None included

Other:

- Information cursory — background in gerontology is necessary
- Without such background, more information needs to be sought to conduct program
- Program limited and lacks detail and cohesion
- Though author suggests using professionals for sessions, no outlines or suggestions of content are included
- Narrow topics may limit rural use
- Program dated — latest resources listed, 1984

Materials May Be Obtained From:

Jean Toon
Midland Area Agency on Aging - Hastings, Nebraska
PO Box 905
305 N. Hastings
Hastings, NE 68902
(402) 463-4565

Program Descriptors: AAA, aging process, dementia, family, family dynamics, home, organic brain syndrome, safety, training

R1

ADULT SITTER CLINIC PROGRAM MANUAL

[1974(d), 1983(p), c uk]

Developer:

- Texas Agricultural Extension Service
  Texas A&M University

Program Category:

- Respite

Abstract:

The Adult Sitter Clinic Program, offered through Texas Agricultural Extension Service, is intended for families providing assistance to their elderly members and for individuals who provide assistance to the elderly on a paid basis. The program is designed to provide information on the practical aspects of caregiving in the areas of physical and mental health. Program objectives include the following: (1) to provide skills and knowledge which will qualify mature and older persons to become effective sitters; (2) to provide job opportunities for older persons living on fixed incomes; and (3) to provide a source of help to individuals in need of qualified sitters.

The manual offers a variety of program formats, the most suitable to be determined according to factors such as the availability of resource people and meeting space. A progression of topics as outlined in the manual is suggested since certain activities and discussions depend on concepts presented earlier. Topics include the role and responsibility of an Adult Sitter; the aging process; basic human needs; sensitizing people to the process of aging; communication skills; understanding grief and loss; physical care training; coping with stress on the job; legal responsibilities; and local job environment.

Sitter clinics have been offered in a variety of time frames which include three to five consecutive days in one week; two days per week for two weeks; one day per week for four weeks; on mornings only for one week; etc. There is no consensus as to the best time frame. Included in the manual are guidelines for implementing and conducting the clinic, sample pre- and post-tests, copy-ready handouts, and suggestions for follow-up training to supplement the knowledge gained in the basic clinic and to offer an opportunity for sitters to "network" and support each other emotionally.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Sensory deprivation and the communication process
- Death and grief
- Decision making/problem solving/communication skills
- Coping with stress
- Some of this program's curriculum materials also appear in the following programs: *Adult Sitter Clinic Workshop, Family Caregiver Program,* and *Training Respite Caregivers for Alzheimer's Family Support*

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Organizational skills
- Knowledge of aging issues
- Nurse
- Social worker

Suggested Resources/Professionals:

- Audiovisual materials
- Participant resource pack materials
- "Simulation" props such as cotton, rubber gloves, and other easily obtainable items as outlined in the manual
- Four- to six-member task force
- Resource people to deliver session topics

Collaborative Organizations:

- Extension Services
- Direct service provider agencies
- Older adult organization
- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	$5.00
Camera ready handouts	Included
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
News article	Included
Administrative forms	Included
Sample art	Included
Total pages of materials (approx)	77

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Texas Agricultural Extension Service
  Texas A&M University

Type of Evaluation:

- Pretest/post-test

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- For program information, contact Judith Warren, Gerontology Specialist, Texas Agricultural Extension Service, 205 C Special Services Building, Texas A&M University, College Station, TX 77843-2251, (409) 845-1146
- When ordering program materials, use program identification #B 1492 and program name

REVIEWER COMMENTS

Community Characteristics:

- Less well established communities (rural) could use this

Target Audiences:

- Potentially under-employed adults with reasonable intelligence who are cheerful and sensible but may possess only a minimal level of literacy

Time Intensity:

- Fairly easy to adopt
- Manual provides the entire program
- It takes three days to run the clinic

Content Specialist/Skills:

- Knowledge of caregiving, aging, and community resources

Evaluation:

- Post-test
- No participant evaluation in manual

Other:

- Does not describe job or sitter but how to run clinic
- Little substantive material on what to do in adult sitter's role

Materials May Be Obtained From:

Mollie Byrd
Texas A&M University
Bulletins-101, Reed McDonald Building
College Station, TX 77843-2112
(409) 845-6573

Program Descriptors: activities, ADL, aging process, communication skills, Cooperative Extension, frail elderly, grief, job skills, legal, long term care, personal care, resources, respite, sensory deprivation, vision

ADULT SITTER CLINIC WORKBOOK

[1983(p), c uk]

Developer:

- Diane G. Smathers (adaptation)
- Judith L. Warren (original authorship)
- University of Georgia Cooperative Extension Service

Program Category:

- Respite

Abstract:

The Adult Sitter Clinic was developed to train older or mature adults who are interested in providing for dependent adults. Objectives of the program are to teach skills and techniques that should enable mature adults to become effective sitters, thereby offering them an opportunity for employment. The program meets a social need by cooperatively providing assistance to families and the community.

The clinic is a two- to three-day workshop consisting of 20 hours of instruction and practice in the areas of human relationship skills, physical care of the patient, home management skills, and role and responsibility of the sitter. Topics addressed include understanding the aging process, dealing with the terminally ill, communicating with the family, coping with the disoriented, infection control, patient hygiene, basic nursing skills, nutrition and special diets, sitter characteristics, ethics, legal aspects, employment opportunities and resources, and adapting to the work environment.

Since much of the information presented is technical, it must be presented by trained health care personnel. Cooperation from a local hospital or county medical personnel is essential to the success of the program.

A resource list of audiovisuals and other materials needed to run the program is included.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the care receiver
- First aid
- CPR
- Some of this program's curriculum materials also appear in the following programs: *Adult Sitter Clinic Program Manual, Family Caregiver Program,* and *Training Respite Caregivers for Alzheimer's Family Support*

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Administrative skills
- Organizational skills
- Knowledge of local health care professionals and/or organizations for potential support and sponsorship
- Knowledge of aging and caregiving issues
- Teaching experience
- Nurse
- Social worker
- Gerontologist

Suggested Resources/Professionals:

- Sponsorship/support of local health care professionals and agencies
- Corps of volunteers
- Professional to serve as instructor
- Hospital equipment, i.e., bed, for demonstration purposes

Collaborative Organizations:

- Cooperative Ext/4-H
- Hospital
- Community organization
- Health care agencies

Materials and Costs:

• Facilitator/trainer/leader manual	$5.00
• Camera ready handouts	Included
• Sample news release(s)	Included
• Sample participant evaluation	Included
• Program description	Included
• Administrative forms	Included
• Total pages of materials (approx)	122

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- University of Georgia Cooperative Extension Service

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test
- Participant evaluation

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- These materials are out of print; updated revision available under the name "*Home Health Companion Aide*" (400 pages, written by William Reid - cost is expected to be under $5.00)

REVIEWER COMMENTS

Community Characteristics:

- Program may work well in rural setting
- Sponsor may work through Extension, county health departments, case managers, nurses, and social workers
- Local rescue squad and EMTs may also be involved

Target Audiences:

- Physically healthy
- Reasonably good communicators

Time Intensity:

- Four months to develop program
- From the time corps planning group established, estimated 20 1/2 planning hours

Content Specialist/Skills:

- Health care personnel and/or people in human-services-related occupations for planning and conducting program
- Primary coordinator should be well organized, with knowledge of community resources

Evaluation:

- Evaluation of clinic upon completion of training
- Questionnaire six months later to determine if presently employed as sitter, earnings, hours worked, income sources, and what information in training was most beneficial

Other:

- Program particularly well suited for rural areas — it is portable and easily transported so participants would not need to travel far
- Excellent handbook for marketing suggestions with many examples

Materials May Be Obtained From:

William H. Reid
University of Georgia Cooperative Extension Service
Hoke Smith Annex
Athens, GA 30602
(404) 542-8878

Program **Descriptors:** activities, aging process, communication skills, Cooperative Extension, job skills, meals, nutrition, personal care, respite, university

CARING THAT MAKES A DIFFERENCE. SENIOR RESPITE CARE PROGRAM

[1983(d), 1984(p), c]

Developer:

- Marilyn Cleland
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Respite

Abstract:

It is the mission of the Senior Respite Care Program to assist in easing the burden of families who care for older adults by providing affordable respite care, information/referral, and a list of private-duty care providers. By supporting family caregivers in the home setting, the program seeks to accomplish the following goals: (1) to enable older persons to remain in a home environment and prevent or delay institutionalization and (2) to assist in decreasing long-term care costs for society.

The program is structured for Respite Care Providers to receive 16 hours of training prior to being placed in a client's home. After completing the training, the respite worker should be equipped to provide companionship, supervision, meal preparation, and light personal assistance to clients. Not included in the respite provider's duties are the responsibilities of housework, errands, administering medications, lifting clients, or giving incontinent care.

The program's training schedule is arranged in three, full-day sessions which address such topics as sensory and organic changes and the psychosocial aspects of aging; the role of the respite worker in dealing with the chronically ill, with a focus on Alzheimer's Disease, Stroke, and Parkinson's Disease; ethical concerns; and the use of community resources.

The program manual includes the following materials to assist the facilitator: statements of goals, quizzes, suggestions for setting up the program, suggestions for effective use of the manual, suggestions for guest speakers, special notes to the instructor, etc.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Ability to tailor the training sessions to the needs of the participants and the families they serve
- Teaching
- Knowledge of content areas
- Knowledge of aging issues
- Nurse

Suggested Resources/Professionals:

- Publications and audio visuals which must be ordered in advance from various resources
- Easily obtainable items as listed in the program manual

Collaborative Organizations:

- Hospital
- Religious facility
- Community organization
- Home health organization

Materials and Costs:

Facilitator/trainer/leader manual	$45.00
Camera ready handouts	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Special package available	
Quantity reductions available	
Total pages of materials (approx)	209

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Type of Evaluation:

- Attendance count
- Self-report of attitude and behavior change
- Pretest/post-test

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- New section on Multiple Sclerosis will be added in 1990
- Minority care providers have participated in the training
- For specific information on this program, contact Leah Eskenazi at (503) 229-7348
- A fee has been charged for the class — $25

REVIEWER COMMENTS

Community Characteristics:

- A large community
- Optimum numbers of people to be trained and supervised

Target Audiences:

- References are at advanced nursing and geriatric medicine levels, but handouts are for minimal reading levels and educational backgrounds
- Trainer should have ability to translate background information to be used for all literacy levels
- Condensed, brief handouts facilitate use by people with minimal reading interests

Time Intensity:

- Some time to pull together all special recommended equipment
- Curriculum is basically a canned program that would not require extensive preparation time
- Most time spent in actual training
- Advertising time necessary to recruit numbers of participants
- Three full days of training are involved

Content Specialist/Skills:

- Trainer or facilitator needs to be well trained and knowledgeable
- Ability to tailor materials for whatever group or providers are being trained and clients being served
- Knowledge of aging and impact of chronic illness on older families
- Specialized knowledge of Alzheimer's disease, strokes, and Parkinson's disease

Evaluation:

- Sample form for client and provider included
- Pre- and post-tests available throughout manual on substantive content areas

Other:

- Unique and comprehensive training manual — especially fine for facilitators
- Very concrete and specific
- Very good handouts
- General information on aging is a little dated
- Particularly good communication guidelines and facilitating understanding of family caregiver and patient with specific disabilities
- Easily used in rural areas if there were a sufficient pool of people able and willing to be trained and make a commitment to work with families
- One problem with this manual is that authors keep emphasizing this is companion-level care, and yet they are really training people to go beyond that

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: activities, adaptive equipment, ADL, aging process, Alzheimer's disease, bathing, cognition, communication skills, decision making, dementia, depression, difficult behaviors, disabled, dressing, driving, emergency plans, environment, ethics, exercise, falls, family, family dynamics, frail elderly, grief, health care professional, hearing, home, hypertension, incontinence, lifting/transferring, long term care, meals, medication, memory, mental health, multiple sclerosis, paralysis, Parkinson's disease, reminiscence, resources, respite, safety, seizures, self esteem, sensory deprivation, skin care, stroke, training, transportation, vision

DEVELOPING A CAREGIVER'S LISTING SERVICE

[1989(p), c]

Developer:

- Steve Sinovic
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Respite

Abstract:

Developing a Caregiver's Listing Service is one of a series of Helping Families Help Themselves programs developed at the Family Support Center of Good Samaritan Hospital and Medical Center. Developing a Caregiver's Listing Service provides information and suggestions on how to establish and sustain a listing service linking families with those seeking home-care employment ranging from part-time to live-in care.

The program calls for successful completion of a two-day training course to qualify employment-seeking caregivers for listing with the service. Development of subjects for the course should be designed to increase understanding and management skills of chronic diseases and to best meet the needs of clients seeking in-home care services. For services geared to an older population, a specific training program is suggested and information given on how to obtain curriculum materials.

The time required to implement and operate a caregiver's listing service as set forth by the program's guidelines should be less than one week a month. Included in the guidelines are a description of the service, how to start the service, suggestions for staffing and office needs, advertising suggestions, and guidelines for screening, training, generating revenue through donations and development of a subscription service, and maintaining quality services. The program manual also includes samples of the following: (1) order forms for materials; (2) letter to professionals about the listing service; (3) training description; (4) news release describing service; (5) certificate of completion of training course; (6) evaluation form; (7) advertising copy; (8) listing service ads; (9) renewal notice letter; and (10) listing service survey.

Curriculum Content:

- Training materials are available for services geared to an older population and *information is given as to where to send for curriculum materials*

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Administrative
- Clerical
- Communication
- Caregiving background
- Social worker
- Nurse

Suggested Resources/Professionals:

- Sponsoring agency
- Office space and equipment such as word processor

Collaborative Organizations:

- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	$8.95
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Special package available	
Quantity reductions available	
Total pages of materials (approx)	23

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Meyer Memorial Trust

Type of Evaluation:
- Self-report of attitude and behavior change
- Listing service survey

Evaluation Results Available From:
- See "Materials May be Obtained From"

Selected Developer Comments:
- Part of a "how-to" series.

REVIEWER COMMENTS

Community Characteristics:
- Established need for in-home respite
- Interested and eligible workers available

- Some type of network with information regarding willing chronic care workers
- Larger urban areas may better offer the needed resources and people for this program

Target Audiences:

- Large base of families with need for in-home worker
- Workers physically and intellectually capable
- Literacy on part of families and workers to use the listing
- Parties able to negotiate satisfactory terms of employment

Time Intensity:

- Initial planning and organization would require a great deal of time
- Intensive for ongoing training, printing, publishing, and networking
- One full- or almost-full-time position

Content Specialist/Skills:

- Organization, personnel, administrative skills for planning
- Training content knowledge
- Teaching skills
- Good networking and people skills to sustain program
- If coordinator and trainer are one person, s/he must be flexible and multi-talented

Evaluation:

- Forms for families and training available in manual
- Overall usage of program would be worthwhile to evaluate

Rurality:

- Probably appropriate through city councils
- Continual update, listing, and two-day training may make rural use difficult
- May be lack of workers or families in need in rural areas
- Difficult to find person qualified to train in rural areas
- Could be creative ways to implement in rural communities
- Possibly small community-based organizations to take this on (use church bulletins for listing)

Other:

- Manual well planned with many samples
- Seems self-supporting with both families and workers paying nominally for the information
- Once initiated with negotiations up to family and worker, may not be as time intensive
- Liability may be an issue
- Offering training may add to expectations and liability
- Sponsoring agency should be aware and arrange best possible coverage - umbrella policy of agency may relieve concerns
- Training may not be extensive or individualized enough
- Perhaps workers should be responsible for own training
- Clearly written expectations may assist in training, job descriptions, and negotiations
- Liability by itself should not prohibit program implementation

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: companion, employment, home, home health, hospital, job skills, respite, service organizations, training

DEVELOPING IN-HOME RESPITE SERVICES

[1989(p), c]

Developer:

- Steve Sinovic
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Respite

Abstract:

Developing In-Home Respite Services is one of a series of Helping Families Help Themselves programs developed at the Family Support Center of Good Samaritan Hospital and Medical Center.

Developing In-Home Respite Services provides information and suggestions on how to establish and sustain an in-home respite services organization, and addresses such issues as assessing the need, program goals, funding sources, selecting a director and staff, recruiting and training respite workers, networking and marketing tips, providing services, budgeting, quality assurance, liability insurance, program planning, and rural issues. The program manual also includes samples of the following: (1) program checklist; (2) budget outline; (3) program director job description; (4) worker schedule; (5) respite provider application and provider continuum; (6) interview questions; (7) reference check form: (8) order form for training program; (9) class schedule; (10) program packet; (11) respite provider job description; (12) caregiver packet and fee schedule; (13) continuum of care; (14) family billing; (15) timesheet; and (16) program evaluation survey.

Curriculum Content:

- Training sessions are outlined and information given as to where to send for curriculum materials

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Administrative
- Management
- Communication
- Fund raising
- Human services background
- Familiarity with the formal service network
- Nurse
- Social worker
- Administrator

Suggested Resources/Professionals:
- Corps of paid or volunteer respite care workers
- Referral sources such as health care professionals, social workers, etc.
- Planning committee

Collaborative Organizations:
- Community organization
- Foundations
- Corporations
- Government agencies
- Sponsoring organizations
- Cooperation from such agencies as AAAs, etc.

Materials and Costs:

Facilitator/trainer/leader manual	$8.95
Program description	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Special package available	
Quantity reductions available	
Total pages of materials (approx)	48

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Meyer Memorial Trust

Type of Evaluation:
- Respite program service evaluation

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Part of a "how-to" series.

REVIEWER COMMENTS

Community Characteristics:
- Supportive services; funding sources
- Professional for training
- Organization for sponsorship
- Numbers of people to do respite and who need it

Target Audiences:

- A population with a determined need
- People willing to accept the service
- Literacy
- Communication skills in worker
- Worker needs to be intellectually and physically capable of being trained for home care; recruitment is key

Time Intensity:

- Time depends on size of program desired
- If needs assessment reveals significant need and there is no other such program, then time intensity will be commensurate
- Assessment, match, organization, referrals, and ongoing supervision probably require full-time position
- May use team approach with part-time positions and divide responsibilities

Content Specialist/Skills:

- Organizational
- Specialization in content
- Nurse
- Social worker
- Gerontology specialist

Evaluation:

- Evaluation for worker and family
- May add evaluation of the professional

Rurality:

- On small scale, with creativity, rural use possible
- Could be based out of rural nursing homes or hospitals
- Knowing rural community well would facilitate adaptation
- Cultural issues, travel time, distance between worker and family are considerations
- Involving local people may be a plus
- Some families are more comfortable with familiar workers
- Others may find it harder to accept respite from a neighbor or acquaintance
- There is a need in rural communities - creativity is key there
- Manual offers straight-forward basic information

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: emergency plans, budget, frail elderly, home, hospital, insurance, job skills, resources, respite, schedule, training

ELDER CARE SHARE
A RESPITE CARE COOPERATIVE (ECS)

[1987(p)]

Developer:

- Mary R. Sawicki
- Southcentral Michigan Commission on Aging

Program Category:

- Respite

Abstract:

Elder Care Share A Respite Care Cooperative (ECS) is a demonstration project which was based on a respite care exchange model. This program emphasizes preventive care: it works to maintain family wellness to help avoid crisis situations. A core group of caregivers, recruited from the community, worked with a professional coordinator to develop policies and procedures for implementation. Two slide tape shows which described the program were produced in addition to regular family member meetings for support and training. All co-op activities were facilitated by a coordinator. The training was given by the primary caregiver. After training these caregivers exchange respite care services with one another; one caregiver providing care for two frail elders, either in his/her own home or in the home of the caregiver receiving respite, depending on the needs of the elders. Program participants do not pay for respite, as this is an exchange of services.

The materials include a comprehensive report of the planning, organization, implementation, training, co-op handbook, descriptions of participants and their co-op experiences, as well as numerous questionnaires and forms. Dissemination included several day-long workshops which portrayed the project and encouraged replication of such a co-op. Despite the expected caregiver reluctance and underuse of such an alternative, this program's description provides valuable insight into this approach to respite care.

Curriculum Content:

- Planning, organization, implementation, and evaluation of a cooperative elder care project

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Organizational
- Knowledge of caregiving issues
- Knowledge of aging issues
- Nurse
- Social worker
- Health care professional

Suggested Resources/Professionals:

- Tape recorder
- Slide projector and screen

Collaborative Organizations:

- Health care organizations
- Cooperation from medical personnel is needed to determine which families should be included in the program.

Materials and Costs:

• Facilitator/trainer/leader manual	Unlisted
• Camera ready handouts	Unlisted
• Camera ready newsletters	Unlisted
• Slides with audiotape	Unlisted
• Brochure/pamphlet	Unlisted
• Total pages of materials (approx)	243

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health & Human Services

Type of Evaluation:

- Pretest/post-test
- Comparative interviews

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- This program is no longer available. It may be reproduced, but agency must be cited.
- When requesting materials from National Technical Information Service, refer to agreement #18-C-98398/5-03 AoA.
- For information about the program content, contact Dr. Joseph Ham, Southcentral Michigan Commission on Aging, 8135 Cox's Drive, Suite 1-C, Portage, MI 49002.

REVIEWER COMMENTS

Community Characteristics:

- This program should involve families of Alzheimer's patients in need of this type of caregiving situation
- The program is dependent on community resources for references, utilization, and support
- Being a co-op rather than a "formal" program, it could be easily glossed over in a search for community resources

Target Audiences:

- Caregivers of Alzheimer's patients with the physical ability to go into a co-op member's home to give care
- Caregivers committed to this type of program

Time Intensity:

- It would take approximately one year to get this program started, considering ongoing recruitment and marketing by the program coordinator
- A care manager, perhaps one of the co-op members, is needed to keep an accurate account of the hours given and received

Content Specialist/Skills:

- A specialist needed to facilitate, plan, market, recruit for, organize, and manage the program
- The specialist and the co-op members need a working knowledge of the community and its available resources
- A professional may also be needed to provide specific training to caregivers

Evaluation:

- An evaluation by Western Michigan University provided an overview of the program, characteristics of the care recipients and caregivers and how the program was conducted
- The program did not appear to be extremely successful or cost effective since a full-time coordinator was paid with only a limited number of families participating
- Developers anticipated providing at least 4,000 hours of respite through the co-op which ended up rendering a little over 100 hours

Other:

- This type of strategy, on a smaller scale, would work in a rural area or a small community if it had a caregiver, or someone in the community such as a volunteer through a church program or any other formal agency who would be able to take on the coordinator role
- It would not require a professional if the leader could tie into an agency which could provide quality training

- May need a lot of community education and support to get program started, as families seem to be reluctant to burden each other with family members needing care
- An interesting idea that could be an offshoot of a support group
- The evaluation of the program seemed a little sketchy

Materials May Be Obtained From:

U.S. Department of Commerce
5285 Port Royal Rd.
Springfield, VA 22151

Program Descriptors: AoA, co-op, emergency plans, employment, family, finances, HCFA, home health, job skills, legal, living arrangements, nursing home, peer support, records, respite, self care, training, volunteer

FAMILY FRIENDS

[1985(d)]

Developer:

- Meridith Miller
- National Council on the Aging, Inc.

Program Category:

- Respite

Abstract:

The purpose of the Family Friends project is to provide meaningful opportunities for older individuals to work with chronically ill and disabled children and their families. The hope is that assistance provided by the older volunteers will improve the lives of the children and their parents, and help the parents continue to care for these special children in their own homes. The challenge to the older volunteer is to provide social, emotional, and informational support to families with many needs.

Within the program guidelines, it is suggested that Family Friend volunteers visit their families at least twice each week, each visit lasting four hours. Volunteers help with basic personal care of the child, inform families of available services, and share various activities such as reading, homework, recreation therapy, etc., with the child.

Family Friend volunteers (who must be 55 or older) attend a 20-hour, medically-oriented training session before visitations may begin and must participate in monthly in-service training thereafter. While a 12-month commitment is hoped for, the commitment to visit at least once per week for nine months (vacation weeks are allowed) is required.

The volunteer training manual includes project information such as responsibilities of Family Friends volunteers, evaluation of volunteers, child/family referrals, etc., and addresses topics such as the following: (1) discipline issues; (2) effects of disabilities and chronic illness on families; (3) normal child development; (4) causes of developmental disabilities; (5) the importance of respite care; (6) emergency procedures and first aid; (7) medication policies; (8) self-help skills; (9) toy safety tips; (10) community resources; (11) mental retardation, cerebral palsy, epilepsy, spina bifida, cystic fibrosis, hemophilia,

sickle cell anemia, and muscular dystrophy; (12) handling children in wheelchairs; (13) behavior management; (14) sensory stimulation and play activities; and (15) when a child dies.

The Family Friends project is sponsored by the National Council on the Aging, Inc.

Curriculum Content:
- Community resources/formal services
- Financial issues
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Medication management
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Developmental disabilities in children
- First Aid and Emergency procedures
- Recreation

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Management experience
- Social work/aging/child development experience
- Knowledge of community resources
- Knowledge of caregiver issues
- Nurse
- Social worker

Suggested Resources/Professionals:

- Corps of elder volunteers
- Cooperation of community service providers
- Transportation and recreational facilities (in appropriate cases)
- Health care workers
- Existing health programs
- Existing children-oriented programs

Collaborative Organizations:

- Community organization
- Social service agency
- Family service agency
- Older adult organization
- Hospitals
- Organizations that service children

Materials and Costs:

Participant handbook/manual	Included
Facilitator/trainer/leader manual	$20.00
Sample news release(s)	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
News article	Included
Journal article	Included
Directory	Included
Total pages of materials (approx)	254

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")
- Developer wishes to train those interested in replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- Group of funders headed by Robert Wood Johnson Foundation
- Eight demonstration sites: Robert Woods Johnson Foundation

Type of Evaluation:
- None identified

Evaluation Results Available From:
- Not available

Selected Developer Comments:
- Revision in progress
- There are fine rural programs running, North Carolina, West Virginia, Arkansas, New Hampshire, and Georgia

REVIEWER COMMENTS

Community Characteristics:
- Child and elder programs necessary
- Agency support: Area Agency on Aging, Jewish Community Services, disease-specific programs
- Funding sources
- Larger metropolitan area would have more resources

Target Audiences:
- Families with disabled children
- Population of older adults
- High level of health proficiency
- Identification and willingness of families to accept help and trust others
- Specific caregiver characteristics/gifts and commitment
- Supportive agencies and professionals for education, support, and supervision

Time Intensity:

- Intensive with extensive and specific training
- Intensive time for preparation and ongoing support for families
- Matching of older worker and families requires much time and planning
- Full-time person to organize, match, provide ongoing support, training, and stress management

Content Specialist/Skills:

- Caregivers with experience and content expertise
- Team with a variety of experience and knowledge would facilitate safety and comfort of all parties
- Substantial judgement is necessary to assess, train, and match

Evaluation:

- None identified
- Should be evaluations by both families and older adults as well as overall measure of program's success

Rurality:

- Difficult to apply to rural areas because insufficient population of specific needs, professionals, funding, and community and agency resources
- Could possibly be adapted in rural community in a less formal and more creative way

Other:

- Program is designed to offer stipend to older workers
- In Kansas City, older adults were volunteers — proving that stipend was not the motivation
- Monthly support groups, training, and stress management requires full-time coordinator
- Funding essential for continuity
- Program may be emotionally laden — requires careful professional supervision
- Program lends itself to very creative approaches and often innovative approaches to the well children in the family
- Manual contains strict list of duties not to be performed - no clear job description for caregivers

Materials May Be Obtained From:

Miriam S. Charnow
National Council on the Aging, Inc.
600 Maryland Avenue, S.W., West Wing 100
Washington, DC 20024
(202) 479-6675

Program Descriptors: activities, ADL, child care, communication skills, developmentally disabled, difficult behaviors, disabled, discipline, dressing, emergency plans, family, family dynamics, finances, fire, first aid, home, housing, IADL, incontinence, intergenerational, legal, lifting/transferring, meals, medication, NCOA, personal care, resources, respite, safety, self care, service organizations, transportation, volunteer

GERIATRIC RESPITE CARE:
EXPANDING AND IMPROVING PRACTICE
AN OPERATIONS MANUAL

[1989(p), c]

Developer:

- Carol R. Hegeman
- Foundation for Long Term Care, Inc.

Program Category:

- Respite

Abstract:

The Geriatric Respite Care: Expanding and Improving Practice An Operations Manual is a resource to help answer the question, "How can respite care be provided in the best way possible?" It contains a national overview of geriatric respite practices, guidelines to quality assurance for geriatric respite, and financial, management, and marketing recommendations. The goals of the Geriatric Respite Care project are to (1) define issues critical to the exemplary delivery of geriatric respite in a wide variety of settings and (2) to encourage ways to duplicate those exemplary services.

Contents of the Operations Manual include definition, history, and rationale of geriatric respite; types of programs; respite recipient and caregiver profile; how respite is perceived by providers; a typology of respite models; case studies, including benefits and drawbacks to consumers and operational viability; respite activities to enhance quality; staffing; wellness maintenance and rehabilitation; caregiver services; improving existing respite delivery; and policy recommendations. Appendices include a national survey of geriatric respite care providers from May 1987; a listing of survey respondents and other respite programs; an operations guide for institutional respite; and sample respite forms as follows: (1) Respite Program Referral Form; (2) Application for Visiting Resident Program; (3) Physician's Report for Visiting Respite Program; (4) Sample Contract; (5) Respite Program Monthly Patient Profile; (6) Respite Program Post-Stay Phone Survey Guide; (7) Respite Demonstration Program Press Release; and (8) Respite Program Sample Public Service Announcement. Also included in the manual is a bibliography and resource list completed from a data base search conducted by the Foundation for Long Term Care and several other references from a 1986 Resource List of the Family Caregivers Program of the National Council on Aging.

Curriculum Content:
- None Specified

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Organizational
- Administrative
- Health care professional

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Health care organizations

Materials and Costs:

Facilitator/trainer/leader manual	$20.00
Sample news release(s)	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Program description	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Total pages of materials (approx)	76

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- The Florence V. Burden Foundation

Type of Evaluation:
- None Specified

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- For information on content of program, please contact Carol Hegeman (see address under "Materials May Be Obtained From")

REVIEWER COMMENTS

Community Characteristics:
- The program reports on a national survey, providing the means by which communities may apply the program

Target Audiences:
- Professionals wishing to start a respite program

Time Intensity:
- The program is offered in various forms, from requiring little time and energy to requiring a considerable investment of time and effort

Content Specialist/Skills:

- R.N., M.A., or M.S.W

Evaluation:

- Not applicable

Other:

- Program consists of a report of a study of some 75 provider programs for respite care
- Provides an analysis of the structure and function of different respite programs, of value to anyone looking for a respite program
- The program contains a fairly useful set of references which includes some of the better documents available on how to run a respite program
- Provides very little "how-to" information

Materials May Be Obtained From:

Foundation for Long Term Care, Inc.
194 Washington Avenue
Albany, NY 12210
(518) 449-7873

Program Descriptors: case management, case studies, community resources, consumerism, Cooperative Extension, employment, finances, frail elderly, home health, hospital, long term care, needs assessment, nursing home, quality assurance, resources, respite, survey

HOW TO START A RESPITE SERVICE FOR PEOPLE WITH ALZHEIMER'S AND THEIR FAMILIES

[1987(p), c]

Developer:
- Rose Dobrof
- The Brookdale Center on Aging of Hunter College

Program Category:
- Respite

Abstract:

How to Start a Respite Service for People with Alzheimer's and Their Families was developed to help alleviate some of the stress experienced by caregivers of Alzheimer's patients. It provides a grassroots, non-medical approach which utilizes a partnership of professionals and trained volunteers to mobilize all available community resources relating to a crucial aspect of the management of Alzheimer's disease.

The program is intended for organizations interested in establishing a respite program for the caregivers of older people suffering from Alzheimer's and various other types of senile dementia. The goals of the program, in providing relief to family members caring at home for a relative, are to offer participants social and recreational opportunities, use trained and sensitive volunteers as providers of care in a supportive setting, and involve community-based agencies, churches, and synagogues in the provision of services to dementia patients and the family caregivers.

The program's guidelines for establishing respite services address such issues as planning the program, recruiting an advisory committee, securing sponsoring agencies, options for funding, costs and budgeting, selecting core staff, choosing a site, ethnicity as a factor in planning and programming, outreach and publicity, utilizing a volunteer staff, liability and letters of agreement with sites, intake and assessment, training and supervision of volunteers, relationships with caregivers, scheduling and activities, equipment and supplies, handling specific problems, contingency planning (coping with the unexpected), program evaluation, and resource materials for training volunteers. Included is a list of recommended audiovisual materials and a bibliography.

Curriculum Content:

- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Sensory deprivation and the communication process
- Decision making/problem solving/communication skills
- Above content is not treated in depth
- References are given for in-depth reading

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Administrative
- Organizational
- Knowledge of caregiving, Alzheimer's disease, and aging and family issues
- Health care professional
- Administrator
- Recreation therapist
- Community health educator

Suggested Resources/Professionals:

- An advisory committee from the community service network
- Additional resource materials as suggested in program manual to complete curriculum information

Collaborative Organizations:

- Direct service provider agency
- A sponsoring agency such as a large research/education/service institution or community-based health or social service agency
- Religious organization
- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	Free
Sample news release(s)	Included
Program description	Included
Brochure/pamphlet	Included
News article	Included
Sample budget/budget guidelines	Included
Administrative forms	Included
Total pages of materials (approx)	63

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- The Brookdale Foundation

Type of Evaluation:

- Internal research staff

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Program has been conducted with Black and Hispanic minorities.
- Outreach efforts and program design were modified to accommodate an ethnically and culturally diverse population group.
- There is a toll-free number available, (800) 648-COPE
- "*In Care of: Families and Their Elders*" is available for $50 (rent) or $295 1/2" VHS, $345 3/4" U-Matic (purchase)

REVIEWER COMMENTS

Community Characteristics:

- Program would work best in a larger community where the sponsor has the ability to market the program to several different groups of caregivers
- Sponsoring from a church or synagogue would be most effective, allowing for a constituency that would utilize the service, plus serve as volunteers (upon whom the program relies)
- Since designed to provide respite only three or four hours per week, association with other community resources in order to help caregivers access additional respite services would be helpful

Target Audiences:

- Participants physically able to get out to attend and possessing at least minimal communication skills

Time Intensity:

- Six to nine months to start program
- Coordinator needed at least one day per week to organize the program, approximately four hours of which would be spent on administrative duties
- Due to high turnover in respite programs, marketing would need to be high priority and may take more than eight hours per week

Content Specialist/Skills:

- A specialist in the area of Alzheimer's disease very important, especially in planning stages
- For execution of program, coordinator would need programming, leadership, and management and organizational skills and knowledge of the community and aging issues

Evaluation:

- Effective for evaluation would be the defining of objectives (collecting and analyzing data and reporting findings to program's staff and funders)

Other:

- Success in a small or rural area would depend on the sponsoring facility's having a large pool of individuals to choose from
- With focus on Alzheimer's patients, pool to draw from may be too small — generalization may be required for broader participation
- Very cohesive manual, easy to understand

Materials May Be Obtained From:

Adele Goldberg
The Brookdale Center on Aging
425 East 25th Street
New York, NY 10010
(212) 481-7670

Program Descriptors: Alzheimer's disease, college, culture/ethnic, dementia, family, finances, legal, needs assessment, resources, respite, training, volunteer

IN-HOME RESPITE CARE: GUIDELINES FOR PROGRAMS SERVING FAMILY CAREGIVERS FOR MEMORY-IMPAIRED ADULTS

[1988(p), c]

Developer:

- Lisa P. Gwyther
- Edna L. Ballard
- Duke University Center for the Study of Aging
  Family Support Program

Program Category:

- Respite

Abstract:

In-Home Respite Care: Guidelines for Programs Serving Family Caregivers for Memory-Impaired Adults describes two models for providing in-home respite care for families of dementia-related disease victims, particularly in the case of Alzheimer's disease. The manual is written for the reader new to respite care, providing terms and definitions and summarizing key ingredients in a successful respite program. Its target audience is any group affected by the need for respite services — families, health and social service workers, legislators, planners, and community leaders.

The program manual provides specific examples of materials addressing the following issues: what respite care is and what types have been implemented; why respite care should be made available; what families want from respite services; benefits and risks of offering respite and accompanying liability issues; funding/reimbursement issues; program development; outreach - fostering public relations, program operation, screening of potential respite services candidates, home assessments, matching respite workers with families, scheduling, record keeping, billing, documentation/monitoring/evaluation; how caregivers use respite time; problems caregivers report about respite services; hints from respite workers and providers; miscellaneous recommendations, etc.

Curriculum Content:

- Legal issues
- Financial issues
- Community resources/formal services
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Coping with stress
- Additional content is addressed in companion manual, "In-Home Respite Care: Guidelines for Training Respite Workers Serving Memory-Impaired Adults"

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Programmatic experience in in-home services and teaching
- Service administration experience
- Knowledge of Alzheimer's disease, aging, and caregiving
- Social worker
- Nurse

Suggested Resources/Professionals:

- VCR and monitor
- Labor pool of providers with personal-care experience

Collaborative Organizations:

- Community organization
- Sponsoring/funding organization

Materials and Costs:

Facilitator/trainer/leader manual	$10.00
Camera ready handouts	Included
News article	Included
Administrative forms	Included
Total pages of materials (approx)	164

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- American Association of Retired Persons, Andrus Foundation

Type of Evaluation:

- See "Selected Developer Comments"

Evaluation Results Available From:

- See "Selected Developer Comments"

Selected Developer Comments:

- Rural and urban models tested before manual developed
- Modifications and suggestions on recruitment of in-home respite providers in rural and urban areas included
- Conducted with Black providers and clients
- Use of video tapes recommended in training manual
- Final report, evaluation report, available for $20 from Dr. Linda George, Box 3003, Duke Medical Center, Durham, NC, 27710

- Evaluation results have been published
- Major research demonstration evaluation funded by AARP Andrus Foundation

REVIEWER COMMENTS

Community Characteristics:

- Existing pool of "chronic care workers" with skills in home and personal care
- Training site, such as classroom or conference room, must be available

Target Audiences:

- Respite workers must be able to read and write at an eighth grade level
- Workers need basic communication skills
- Workers must have prior training in homemaking, home health, and personal care skills
- Workers must be able to translate training content into practice

Time Intensity:

- Program is not very time intensive
- Very mobile--training package may be taken and set up anywhere
- Time to coordinate with caregiver service agencies and recruit workers from agencies
- Depending on relationship with community, program may be implemented start to finish within six to eight months

Content Specialist/Skills:

- Training coordinator must have knowledge in Alzheimer's disease, related dementias, behavior management, aging, personal care, home maintenance, family dynamics, and psychosocial issues
- Full-time program coordinator must be a specialist to plan, promote the program, contact different agencies, and coordinate resources for agencies and workers

Evaluation:

- Pre-/post- Alzheimer's caregiver exam given to respite workers
- Informal performance evaluations of workers by supervisors also conducted

Other:

- Easily implemented in rural setting
- May want to address specific cultural needs of community that may be more apparent in small rural areas than in urban
- Wonderful section on managing problem behaviors

Materials May Be Obtained From:

Lisa Gwyther
Duke University Medical Center
Box 3600
Durham, NC 27710
(919) 684-2328

Program Descriptors: AARP, ADL, Alzheimer's disease, family, family dynamics, finances, frail elderly, home health, IADL, needs assessment, resources, respite, university

IN-HOME RESPITE CARE: GUIDELINES FOR TRAINING RESPITE WORKERS SERVING MEMORY-IMPAIRED ADULTS

[1988(p), c]

Developer:

- Edna L. Ballard
- Lisa P. Gwyther
- Duke University Center for the Study of Aging
  Family Support Program

Program Category:

- Respite

Abstract:

In-Home Respite Care: Guidelines for Training Respite Workers Serving Memory-Impaired Adults responds to the critical need for dependable, temporary relief from caregiving responsibilities, particularly for severely impaired persons who require consistent, round-the-clock supervision.

To equip respite workers with specific skills and techniques in managing problem behaviors such as those associated with Alzheimer's disease, the program outlines a one and one-half day respite training program. Day one is a full day session covering topics such as Alzheimer's disease and its impact on the patient and family, behavioral problems and management strategies, activities for the Alzheimer's patient which support and/or enhance self-esteem and functioning, problem-solving skills, and the respite worker's relationship with the family. The second training session consists of a half-day session addressing such issues as stress factors to be overcome by the Alzheimer's respite worker and handling the loss of a patient.

The level of training is appropriate for family members and lay persons, as well as professionals, providing specialized training which focuses on developing an understanding and a sensitivity to the nature of dementing illness. A major requisite for this training is prior training in homemaker/home health skills and a repertoire of personal care assistance skills.

Curriculum Content:

- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Coping with stress

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Training in homemaker/home health skills
- Personal care
- Teaching experience
- Health care professional
- Nurse
- Social worker

Suggested Resources/Professionals:

- Suggested 30-minute 3/4" or 1/2" video tape and machine and other easily obtainable materials as listed in the manual
- Outside resource materials

Collaborative Organizations:

- Older adult organization
- Hospital
- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	$10.00
Camera ready handouts	Included
Program description	Included
News article	Included
Administrative forms	Included
Total pages of materials (approx)	110

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:

- American Association of Retired Persons, Andrus Foundation

Type of Evaluation:

- Pre- and Post-Alzheimer's Caregiver's Exam
- Informal evaluation of respite workers' performance by supervisor
- Respite training evaluation

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Scheduling and training modifications made for rural areas
- Have conducted program with Black minorities

- Community resources, formal services, and living arrangements are covered in companion manual, "In-Home Respite Care: Guidelines for Programs Serving Family Caregivers for Memory-Impaired Adults"
- Manuals may be used in conjunction with one another

REVIEWER COMMENTS

Community Characteristics:

- Home-health-hospital-based agency adjunct to a large nursing home day care unit

Target Audiences:

- Not addressed by reviewer

Time Intensity:

- Very sophisticated program that may take between six months and a year to plan and implement
- Time for respite workers involved care for impaired individuals, as well as day care center and home health agency commitments

Content Specialist/Skills:

- Nursing supervisor needed to coordinate nursing assistants
- Nursing assistants need to be highly trained and very knowledgeable in Alzheimer's disease and gerontology

Evaluation:

- Program evaluated impact of instituting respite on the agency and impact of providing respite on the workers themselves and family caregivers
- Family caregivers reported same number of negative feelings about their situations before and after the program
- Reports showed an increase in positive or happy feelings families had in their situations
- Though agencies reported consumer satisfaction and cost reduction in client care, some agencies gave up program because caregivers were reluctant to use the service

Other:

- Respite workers in a more rural setting must do a wider continuum of care, so this model should fit well

Materials May Be Obtained From:

Lisa Gwyther
Duke University Medical Center
Box 3600
Durham, NC 27710
(919) 684-2328

Program Descriptors: AARP, activities, ADL, Alzheimer's disease, art, bathing, cognition, communication skills, dementia, dental care, difficult behaviors, discussion group, dressing, family, family dynamics, frail elderly, grief, incontinence, meals, memory, nutrition, physician, problem solving, resources, respite, self care, skin care, stress, support group, training

MANUAL FOR PROVIDERS OF IN-HOME RESPITE CARE OF PERSONS WITH ALZHEIMER'S DISEASE

[1989(p), c]

Developer:

- Carolyn French
- Janice A. Coye
- Mary Lou Dykes
- Ralph Ricketts
- The Alzheimer's Association, Atlanta Area Chapter

Program Category:

- Respite

Abstract:

In response to the perceived need of direct respite services for Alzheimer's patients and families in the Atlanta area, the local chapter of the Alzheimer's Association initiated two adult day care centers and in-home respite services. Based on the success of these, a grant from Title III-D of the Older Americans Act was awarded to develop Manual for Providers of In-Home Respite Care of Persons with Alzheimer's Disease. This offers a model for easy adaptation by agencies beginning in-home respite care programs for persons with Alzheimer's disease and their family members.

The manual has as its objectives: to describe a philosophy of care emphasizing the dignity of the person with Alzheimer's disease and the quality of his/her care enabling the highest level of functioning; to outline the essential elements of providing in-home respite care; to define the respite care model developed by the Atlanta Area Chapter of The Alzheimer's Association; and to share samples of forms and letters for use in such a program. This does not provide Alzheimer's disease education, discuss specialized day centers, or contain actual content of each training program course. However, references, resources, publication lists, and descriptions are included.

The components of a respite care model are thoroughly discussed in separate sections of the manual. These include the following: *Determining the Market*; *Recruitment and Training*; *Enrollment of Families* (assessment and matching workers with families); *Respite Care Services* (supervision and continuing education) and *Financial Arrangements*.

Sample documents (schedules and agendas for training, letters, etc.), forms (for family, client, and provider), evaluations, and camera ready information are included within the appropriate sections of the manual.

Curriculum Content:
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Chronic illness and/or senile dementia

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Knowledge of local community and its resources
- Knowledge of Alzheimer's disease
- Organizational and administrative abilities
- Accounting
- Administrator
- Nurse
- Social worker

Suggested Resources/Professionals:
- Community funding sources
- Health professionals and administrative and clerical staff

Collaborative Organizations:

- Nursing home
- Older adult organization
- Hospital
- Day care
- Community organization
- Government agency

Materials and Costs:

Facilitator/trainer/leader manual	$50.00
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Sample budget/budget guidelines	Included
Total pages of materials (approx)	116

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Title III-D of the Older Americans Act under contract with the Atlanta Regional Commission and the Georgia Department of Human Resources Office of the Aging

Type of Evaluation:

- Self-report of attitude and behavior change
- Cost effectiveness

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Georgie Booker
Atlanta Area Chapter Alzheimer's Association
3120 Raymond Drive
Atlanta, GA 30340
(404) 451-1300

Program Descriptors: adult day care, Alzheimer's Association, Alzheimer's disease, AoA, community resources, dementia, difficult behaviors, employment, family, finances, health care professional, needs assessment, personal care, resources, respite, state unit on aging, training

RESPITE CARE

[1985(p), c]

Developer:

- Eric Pfeiffer
- Lillian Middleton
- Grace Shinaman
- Suncoast Gerontology Center
  University of South Florida Medical Center

Program Category:

- Respite

Abstract:

Respite Care is one of six papers presented at a conference held in Atlanta, Georgia in August 1985. This publication is intended to be of benefit to the aging network, namely the state units on aging, the area agencies on aging, and the service providers supported by those agencies in their efforts to provide caregivers with temporary relief from the burden of care for a chronically disabled older person.

The paper deals with (1) the concept of respite care - what respite care is, the intent for the patient and for the family, its role in the long-term care system, its potential to produce cost savings, its limitations, its utilization with populations other than the impaired elderly, its goals for non-elderly individuals, its underlying assumptions, these goals as they apply to the elderly, and types and settings; (2) day-care services - what you should know about adult day care, appropriate target populations, characteristics of a model dementia-specific adult day-care program, some of the practical programmatic problems that emerge in providing adult day-care services, and some of the administrative problems in planning, implementation, and operation; (3) in-home respite care - its goals and objectives, the appropriate target audience, characteristics of a model program, some practical programmatic problems, and practical administrative problems; (4) short-term institutional respite care - target audience, characteristics, and problems; and (5) discussion of policy issues - key policy issues associated with respite care, ways to stimulate the supply of respite-care services, how consumers pay for these services, and the question of superiority of Alzheimer's disease-specific day care over general day-care programs.

Respite Care was supported in part by Grant #0090AT2157 from the Administration on Aging, Department of Health and Human Services.

Curriculum Content:

- Planning, organization, and implementation strategies for respite program

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Administrative
- Organizational
- Community resource knowledge and access
- Fund-raising ability
- Health care professional
- Administrator

Suggested Resources/Professionals:

- None Specified

Collaborative Organizations:

- Community organization
- Health care facilities

Materials and Costs:

Program description	$4.00
Total pages of materials (approx)	30

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- None Specified

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- This program has a training manual, "*Training Respite Care Workers for Alzheimer's Disease Patients,*" to complement its use

REVIEWER COMMENTS

Community Characteristics:
- Geared toward administrator or program developer contemplating the idea of providing respite services

Target Audiences:
- Fairly extensive background in the field

Time Intensity:
- Not applicable

Content Specialist/Skills:

- A specialist in content area is required to utilize material
- Background in gerontology, case management, or social work

Evaluation:

- Not applicable

Other:

- This is primarily a discussion of the complexity of respite programs and how they benefit patients and caregivers
- Provides good background reading for professionals interested in respite
- Of value to people contemplating respite in rural areas because it provides information on several different respite options

Materials May Be Obtained From:

Eric Pfeiffer
National Resource Center on Alzheimer's Disease
Suncoast Gerontology Center
University of South Florida Medical Center
Health Sciences Building
12901 Bruce B. Downs Blvd., MDC Box 50
Tampa, FL 33612-4799
(813) 974-4355

Program Descriptors: activities, adult day care, Alzheimer's disease, finances, home health, resources, respite, training, transportation, university, volunteer

RESPITE CARE AIDE MANUAL

[1989(p), c]

Developer:
- Family Survival Project for Brain-Impaired Adults

Program Category:
- Respite

Abstract:

The Respite Care Aide Training Manual was developed in response to the needs of respite care and respite care aides recognized by professionals, families, and friends of the brain-impaired. The intent of this manual is to take a broader approach to respite care, as many of the training materials produced in the past have been specific to one problem or diagnosis. This manual attempts to provide a thorough guide for the respite care aide and a tool that leads aides, trainers, and family caregivers to other resources they need. It is hoped that this training for a broad spectrum of impairments will help alleviate the burden of caregiving for families and provide rewarding and important work for older adults.

The manual includes nine chapters with substantive content which focus on specific topics. For each, objectives and suggestions for speaker types and qualities are discussed (in the Appendix). Each chapter topic is designed to be taught in three hour sessions once a week. However, flexibility and modifications are recognized. These sessions include: *Understanding Others; Rights and Responsibilities; Overview of Disorders Covered (seven): Activities of Daily Living; Communications and Problem Solving Skills; Behavior Problems; the Physical Environment; Taking Care of Yourself;* and *You As A Resource.* Incorporated into the text are worksheets, camera ready handouts, charts and resources. The Appendix includes a bibliography, in addition to notes to the trainers.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues

- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Living arrangements
- Medication management
- General nursing skills
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Health promotion for the caregiver
- Health promotion for the care receiver
- Coping with stress
- Dental/oral health
- Physical changes with aging
- Hearing
- Vision

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Knowledge of brain-impaired disorders
- Knowledge of community resources
- Caregiving experience/knowledge
- Public speaking
- Teaching
- Health educator
- Nurse
- Social worker

Suggested Resources/Professionals:

- Health care professionals

Collaborative Organizations:

- Senior center
- Nursing home
- Older adult organization
- Hospital
- Community organization

Materials and Costs:

Facilitator/trainer leader manual	$20.00
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Total pages of materials (approx)	126

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- California Department of Mental Health

Type of Evaluation:

- Not evaluated

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Laura Cole
Family Survival Project
425 Bush Street, Suite 500
San Francisco, CA 94108
(415) 434-3388

Program Descriptors: activities, ADL, aging process, Alzheimer's Association, Alzheimer's disease, cardiovascular system, chores, cognition, communication skills, decision making, dental care, difficult behaviors, disabled, dressing, elder abuse, employment, family, family dynamics, finances, grief, health care professional, hearing, home, housekeeping, IADL, incontinence, legal, meals, medication, memory, mental health, nursing skills, nutrition, Parkinson's disease, personal care, problem solving, relaxation, resources, respite, risk factors, safety, stress, stroke, training, vision

RESPITE CARE FOR ALZHEIMER'S VICTIMS: CAN INTERFAITH VOLUNTEERS HELP FILL THE GAP

[1986(p)]

Developer:

- Connecticut Department on Aging
- Interfaith Volunteer Program

Program Category:

- Respite

Abstract:

In the Respite Care for Alzheimer's Victims program, the Connecticut Department on Aging and three interfaith volunteer agencies combined their efforts to recruit, match, and provide support to volunteer respite workers and caregiver families. Furthermore, a licensed case management agency trained volunteers, assessed caregiver families, and provided emergency backup support for respite caregivers.

The 12-hour training for respite volunteers included: lectures, a movie, a visit to an adult day care center, and interaction with family caregivers. This program was intended to accomplish the following: (1) families would receive needed respite from caregiving responsibilities; (2) caregiver stress would be relieved; (3) clients would receive quality care; (4) institutionalization would be delayed; (5) volunteers would receive training in specific skills and techniques; and (6) volunteer agencies could form new links and networks with the health care/human service system.

The developer's evaluations indicated that the volunteers increase their skills and knowledge of the normal aging process and of Alzheimer's disease. Interviews with family caregivers indicated that the families felt confident in the respite workers' abilities, and that the volunteers lessened the caregiving burdens of the family members.

The accuracy of placement assessments between Alzheimer's patients and respite workers was indicated by the small number of "problem placements."

Curriculum Content:

- None Specified
- Planning, organization, implementation and evaluation of a volunteer respite program

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Background in health care, needs assessment, training, and working with volunteers
- Knowledge of caregiver issues
- Sensitivity to Alzheimer's issues
- Nurse
- Social worker

Suggested Resources/Professionals:

- Corps of volunteers
- Trainers/assessment staff

Collaborative Organizations:

- Religious facility
- Health care facilities
- Volunteer organizations

Materials and Costs:

Final report	No Cost (one copy)
Total pages of materials (approx)	123

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:
- Pretest/post-test
- Evaluation of training forms
- Record of usage of back-up system
- Client Satisfaction Survey

Evaluation Results Available From:
- Contained Within Program Materials

Selected Developer Comments:
- The greatest difficulty with this program is in matching the family and volunteer.
- Very limited supplies of materials

REVIEWER COMMENTS

Community Characteristics:
- Strong, large network of churches or synagogues to recruit volunteers
- An identified Alzheimer's population in the community
- Access to local newspapers and organizational newsletters to advertise program and recruit volunteers

Target Audiences:

- Respite workers need to be mobil and in good mental and physical health
- Patient and flexible
- Good communication skills
- Able to understand training materials and willing to follow directions given in materials
- Willing to make a commitment to follow through with families
- Workers need their own transportation

Time Intensity:

- A considerable amount for developing and conducting
- Much time to recruit families and respite volunteers and matching them
- Other time issues include securing funds, establishing support from the religious community and educating the general community

Content Specialist/Skills:

- Sponsoring agency needs experience in volunteer coordination, caregiver and care provider issues
- Project coordinator must know Alzheimer's disease, planning management, marketing, evaluation, and community resources
- Nurse or social worker for assessments of individual or family
- Trainers must be familiar with basic aging, Alzheimer's disease, family dynamics, and caregiving issues

Evaluation:

- Pre/post test design for respite worker training
- Client satisfaction survey
- Evaluation of project's organizational structure

Other:

- While program targets Alzheimer respite care, in rural areas may need to be open to other caregivers
- In rural community, sponsor may want a verbal or written endorsement from trusted, well-respected community person to enhance willingness to use service
- Sponsor may want to bring training to different rural areas rather than requiring respite volunteers to travel to urban site

Materials May Be Obtained From:

Louis Goldblatt
State of Connecticut
Department on Aging
175 Main Street
Hartford, CT 06106
(203) 566-8661

Program Descriptors: Alzheimer's disease, AoA, family, lifting/transferring, needs assessment, religion, resources, respite, volunteer

R16

RESPITE COMPANION PROGRAM MODEL, Volume VII

[1985(p), c]

Developer:

- Lorraine Lidoff
- National Council on the Aging, Inc.

Program Category:

- Respite

Abstract:

The Respite Companion Program Model is a guide for establishing and operating a program to provide respite, or time off, to elder care recipients' regular caregivers. The "how-to" guidelines presented are not intended to be all encompassing, but are offered for consideration and adaptation in developing similar programs in different settings. The model may be used by any service agency, community group or voluntary association that wishes to provide a relief service for caregivers.

Presented is a step-by-step process for putting a Respite Companion Program into place. It is an overall approach that has proven to be generally logical and effective, but may require adjustment to work in any particular community.

The program development process presented has three basic parts: planning, organization, and implementation. Included is a flow chart which depicts the entire process, showing the steps in a sequential relationship. The three sections of the manual follow the flow chart and explain each of the basic parts, its objectives and the steps needed to accomplish them.

Stage I, *Planning*, outlines assembling a strategy team, determining need and anticipated demand, assessing feasibility of program idea, developing work plan, and identifying the resources required.

Stage II, *Organization*, outlines establishing overall program structure, identifying necessary functions and delineating role of each component, and linking with other related service programs and organizations.

Stage III, *Implementation*, outlines conducting outreach, conducting intake, recruiting and hiring respite workers, training and supervising workers, coordinating service provision, and documenting, monitoring, and evaluating the program.

Also contained are options for funding the program; words of advice from the experts; sources of additional information on respite and on general program development topics; examples of other similar programs; general references on planning, public relations, fund raising and grantsmanship, etc.; and an appendix which includes a sample brochure, "request for respite services" sample form, sample job description for respite workers, sample respite worker application, and sample master schedule.

Curriculum Content:
- None Specified

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Administrative skills
- Knowledge of aging issues and caregiver needs and concerns
- Knowledge of health care and community resources
- Administrator
- Health care professional
- Social worker

Suggested Resources/Professionals:
- Strategy team
- Funding sources

Collaborative Organizations:

- Health care facilities
- Cooperation from community service agencies

Materials and Costs:

Facilitator/trainer/leader manual	$8.00
Program description	Included
Brochure/pamphlet	Included
Administrative forms	Included
Shipping and handling	$2.00
Total pages of materials (approx)	63
Specify order number 293	

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Charles Mott Foundation

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- To order, write to the Publication Department
- Specify order number 293

REVIEWER COMMENTS

Community Characteristics:

- Sponsor should be an established agency
- Too complicated for one to start a small program
- Most helpful for areas which support specific programs, as the manual emphasizes interrelationships among agencies

Target Audiences:

- For full benefits, a professional background is needed

Time Intensity:

- Very time intensive
- Very sophisticated
- Very long planning process

Content Specialist/Skills:

- Trained aging specialist
- Social worker or nurse
- Coordinator needs good administrative skills

Evaluation:

- Ideas for evaluating the program are provided

Other:

- Manual provides good organizational plans
- May be difficult to utilize in rural area unless there were a fairly large organization for sponsorship
- The value of this manual is that it is a process manual — very good administrative and evaluation processes
- Does not provide many specifics on "how-to" set up a respite program
- Excellent bookkeeping ideas and good evaluation tools

Materials May Be Obtained From:

NCOA Publications
National Council on the Aging, Inc.
Department 5087
Washington, DC 20061-5087
(202) 479-1200

Program Descriptors: companion, finances, frail elderly, job skills, NCOA, needs assessment, resources, respite, training

RESPITE: HELPING CAREGIVERS KEEP ELDERLY RELATIVES AT HOME

[1986(p), c]

Developer:

- Annette Kane
- National Council of Catholic Women

Program Category:

- Respite

Abstract:

The Respite program is designed to encourage communities to provide volunteer services to keep their elderly members within the community, as opposed to sending them into institutions. Important to the program developers is the continued stressing of a spiritual foundation within the program, a foundation which differentiates it from secular respite care programs which lack a Christian basis.

The manual addresses such issues as getting a respite program off the ground; the pilot training session; identifying and serving families in need, dealing creatively with limitations, and how to keep your respite program going. Specific topics of discussion include identifying a need for respite; recruiting volunteers; organizing the training program; handling the cost issue; the need for community support; dealing with enmeshed families; evaluation of training; the need for a broad outreach; the social service agency link; serving a large geographical area; basic steps to finding needy families; sensitivity to family reluctance; serving broad family needs; challenges of geographical dispersion; limitations of respite; promoting respite; dealing with Alzheimer's disease; liability; listening to your volunteers; recognizing volunteers publicly; recruiting new volunteers; and funding challenges.

The pilot training session includes instruction in the areas of aging as a developmental process; techniques for volunteers in regard to walking and positioning, moving and transferring, feeding and nutrition, and elimination needs; how to recognize signs of a medical emergency; the importance of emotional support for an older person and under-

understanding the family dynamics of his or her home environment; and bereavement and grief. The pilot training program is organized as a full-day session, beginning with the distribution of workshop packets of written materials which are included in the Appendix of this respite manual.

These materials include outlines and fact sheets on (1) Changes in Aging that Have Implications for Walking and Positioning, Moving and Transferring, (2) Implications of These Changes for the Respite Caregiver, (3) Good Body Mechanics: Some Principles, (4) Transferring and Walking, (5) Positioning and Moving, (6) Changes in Aging that Have Implications for Feeding and Nutrition, Elimination, (7) Understanding the Family, (8) Respite, (9) Some Maxims for the Respite Worker, and (10) Respite: Helpful Information to Seek from Family.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Home safety
- Providing personal care (i.e., transferring, bathing)
- Roles/responsibilities/family dynamics
- Health promotion for the caregiver

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Administrative
- Knowledge of aging, health care, and caregiver issues
- Ability to stress the spiritual foundation of the program
- Knowledge of community resources
- Organizational

- Nurse
- Social worker
- Administrator

Suggested Resources/Professionals:
- Health care facilities
- Corps of volunteers
- Funding sources
- Community support
- VCR and monitor

Collaborative Organizations:
- Older adult organization
- Community organization
- State Units on Aging

Materials and Costs:

Facilitator/trainer/leader manual	$8.00
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Brochure/pamphlet	Included
Administrative forms	Included
Postage and handling	$2.00
Total pages of materials (approx)	58

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Catholic Golden Age Foundation
- Raskob Foundation for Catholic Activies

Type of Evaluation:

- Participant evaluation

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Video demonstrates the respite program in action not training
- Videotape is now available entitled: "*A Gift of Love*" (20 minute run time) Loan for $8.00 or purchase price of $24.95 (both include postage)
- Additional brochures on respite care program available for cost of postage

REVIEWER COMMENTS

Community Characteristics:

- Adaptability of the program renders it appropriate in most community settings, urban or rural

Target Audiences:

- Volunteers living in the community who are able to relate to different social services

Time Intensity:

- Much time needed for development and implementation

Content Specialist/Skills:

- Organizer with strong leadership qualities possessing a lot of patience and persistence

Evaluation:

- Evaluation process consists of gathering information from the volunteers

Other:

- Manual is a wonderful tool
- National program which can be adopted in any community that has a chapter of this organization
- Realistic information presented

Materials May Be Obtained From:

Pat Janik
National Council of Catholic Women
1275 K Street, N.W., Suite 975
Washington, DC 20005
(202) 682-0334

Program Descriptors: ADL, aging process, Alzheimer's disease, family, family dynamics, finances, frail elderly, lifting/transferring, needs assessment, religion, respite, training, volunteer

TRAINING RESPITE CAREGIVERS FOR ALZHEIMER'S FAMILY SUPPORT PROGRAM MANUAL

[1985(p), d]

Developer:
- Judy L. Warren
- Texas Agricultural Extension Service
  Texas A&M University

Program Category:
- Respite

Abstract:

The Training Respite Caregivers for Alzheimer's Family Support Program Manual provides information on planning and conducting a training program for respite caregivers who will care for persons with Alzheimer's disease or other dementing illnesses. Though the primary focus of the training is on providing in-home respite on an occasional basis, portions of the training are applicable to workers in adult day programs or institutions.

The program consists of a series of training sessions addressing the following issues: the role and responsibility of a respite caregiver, the aging process, sensitizing people to the process of aging, Alzheimer's disease, understanding and managing the person with Alzheimer's disease, Alzheimer's effect on the family - prolonged grieving, effective communication with the family, physical care, coping with stress on the job, legal responsibilities, local job environment (for panel discussion), and community resources (for panel discussion).

The training format is flexible to allow for adaptability. Various time frames are suggested, such as three to five consecutive days in one week, two days per week for two weeks, one day per week for four weeks, on mornings only for one week, etc.

The program manual is organized within two major divisions. The first section, on planning the training, includes information on linking with appropriate agencies; publicity; cost; resources; and follow-up training covering such topics as basic first aid, CPR, nutrition, physical therapy skills, and depression and the Alzheimer's patient. A suggested

training outline is given and publicity materials are included. Print and audio visual resources are listed. The second section, on conducting the training, includes role play scripts, teaching activities, and handouts (all of which require a high level of participant involvement).

The organization of a task force is recommended to assist the facilitator, provide resource people, and publicize the program.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Community resources/formal services
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Providing personal care (i.e., transferring, bathing)
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Coping with stress
- Some of these curriculum materials also appear in the following: *Adult Sitter Workbook*, *Adult Sitter Clinic Program Manual*, and *Family Caregiver Program*.

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Skills to secure necessary resources
- Expertise in the given subject area if the facilitator is also presenting
- Mental Health Professional

- Nurse
- Social Worker
- Physician
- Physical Therapist

Suggested Resources/Professionals:

- Development of a community task force
- Contacting resource persons to present certain content areas
- Ordering audiovisual materials
- Preparation of "props"

Collaborative Organizations:

- Nursing home
- Hospital
- Area Agency on Aging
- Home Health Agencies
- Cooperative Extension

Materials and Costs:

Facilitator/trainer/leader manual	$10.00
Camera ready overheads	Included
VHS video tape (20 min)	Loan Only
Sample news release(s)	Included
Sample participant evaluation	Included
Administrative forms	Included
Educational game on behavior management	Included
Total pages of materials (approx)	86

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From.")

FUNDING AND EVALUATION

Original Funding:

- Texas Department on Aging

Type of Evaluation:

- Self-report of attitude and behavior change
- Pretest/post-test

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Fewer resource people may be available in rural areas so one person may need to conduct more sessions
- Rural practitioners may have more general expertise
- Therefore, curriculum materials need to be more specific
- For program information, contact Judith Warren, Texas Agricultural Extension Service, Texas A&M University, 205C Special Services Building, College Station, TX 77843-2112, (409) 845-1146
- When ordering program materials through the office of Reed McDonald, specify program identification #B 1603 and program name
- Revised (1988) edition available

REVIEWER COMMENTS

Community Characteristics:

- Suggested is a task force to handle planning, resources, publicity, securing presenters, training, and follow-up support
- Resource persons are required for presenting topics

Target Audiences:

- This is somewhat vaguely stated
- Apparently, the target audience is dependent upon the sponsoring organization
- If participation is generic and open to the community, the response would include people from a wider range of educational backgrounds
- Smaller numbers; part-time or sporadic workers may apply if only one specific agency sponsors program

Time Intensity:

- Materials give little direction on implementation
- Hence, more time may be required for preparation, especially for a presenter unfamiliar with content or training
- Time is required to set up task force
- The program lacks suggested guidelines, forcing the agency to determine time frame
- Eight hours of training would be minimum
- Time frame not given for experimental exercises

Content Specialist/Skills:

- Presenting the program requires knowledge of Alzheimer's disease (preferably the coordinator/facilitator)
- The program requires the involvement of community resource personnel and a nurse

Evaluation:

- A process of evaluation to determine participant satisfaction would be most effective
- Skills evaluation would be valuable and could be done through role play situations

Materials May Be Obtained From:

Mollie Byrd
Texas A&M University
Bulletins-101, Reed McDonald Building
College Station, TX 77843-2112
(409) 845-6573

Program Descriptors: ADL, aging process, Alzheimer's disease, cognition, communication skills, Cooperative Extension, dementia, difficult behaviors, driving, employment, ethics, family, family dynamics, frail elderly, grief, hearing, IADL, job skills, legal, resources, safety, sensory deprivation, stress, training, vision

TRAINING RESPITE CARE WORKERS FOR ALZHEIMER'S DISEASE PATIENTS: A CURRICULUM GUIDE

[1987(p), c]

Developer:

- Lillian Middleton
- Suncoast Gerontology Center
  University of South Florida Medical Center

Program Category:

- Respite

Abstract:

Training Respite Care Workers for Alzheimer's Disease Patients is a curriculum training guide developed to prepare respite care workers in the knowledge and skills needed to work effectively with Alzheimer's patients and their family caregivers. Primary goals of the program are to provide (1) an overview of the normal aging process and an overview of Alzheimer's disease, including its cognitive, physical, emotional, and behavioral aspects; (2) specific techniques and approaches for providing personal care to the patient; (3) techniques for managing mood and behavior problems; (4) an understanding of the impact of the disease on both the patient and the family; (5) knowledge about community resources available for the care of Alzheimer's patients and their family caregivers; (6) a definition of the role of respite workers in the care of Alzheimer's patients; and (7) actual hands-on care experience designed to utilize the knowledge and skills learned.

The program consists of a five-week training course, initially presented in five-hour sessions, three days per week. This format was established on the basis of the number of topics to be addressed, the selection of trainees with no formal aid or nursing training, the belief that time is needed to absorb and digest new material, and the conviction that skills must be applied before they are truly learned.

The curriculum training guide is organized around the following 16 topics: physical and mental processes of normal aging; an overview of Alzheimer's disease; psychosocial, functional, and physical aspects of dementia; providing personal care to Alzheimer's patients; communicating with the Alzheimer's patient; home safety and security needs of

Alzheimer's patients; managing mood and behavior problems; understanding medications; the impact of chronic illness upon families; understanding community resources; basic first aid procedures; cardiopulmonary resuscitation; dealing with death, dying and grief; caregiving ethics and personal conduct; and job hunting, interviewing, and negotiating skills. Each topic includes learning objectives, a brief narrative statement about the importance of and approaches to conveying the material, an outline of the topic, and suggested supplemental readings and audiovisual resources.

Included in the manual are guidelines for field placement; sample publicity; trainee recruitment, screening, and orientation materials; course and trainee evaluation/assessment procedures and forms; matching and placement procedures and forms; caregiver respite application form; telephone caregiver exit questionnaire; and executive summary.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Behavioral changes/behavioral problems
- Home safety
- Chronic illness and/or senile dementia
- Medication management
- Providing personal care (i.e., transferring, bathing)
- Health promotion for the care receiver
- Sensory deprivation and the communication process
- Death and grief
- Roles/responsibilities/family dynamics
- Basic First Aid
- Caregiving Ethics
- Job Hunting/Interviewing

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Background in health and social sciences
- Experience in and knowledge of Alzheimer's disease and the aging process
- Organizational skills
- Communication skills
- Family caregiver
- Nurse
- Social worker

Suggested Resources/Professionals:

- Several knowledgeable "hands-on" guest speakers (experienced family caregivers); physical facilities or settings for "hands-on" experience for workers during training (i.e., adult day care)

Collaborative Organizations:

- Home Health or Adult Day Care Agencies

Materials and Costs:

• Facilitator/trainer/leader manual	$12.00
• Sample news release(s)	Included
• Final report	Included
• Administrative forms	Included
• Orientation packet for caregivers	Included
• Total pages of materials (approx)	173

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Pretest/post-test
- Telephone caregiver exit questionnaire

Evaluation Results Available From:

- See "Materials May be Obtained From"
- Contained Within Program Materials

Selected Developer Comments:

- For specific program information, contact Lillian Middleton, 5401 North Cresta Loma, Tucson, AZ 85704, (602) 887-8387 (private residence)
- Materials currently out of print - revisions in process
  Contact person listed under "Materials Available From:"

REVIEWER COMMENTS

Community Characteristics:

- Suggested as important to replicating the program are supportive, working senior projects, social service agencies, academic-oriented groups with resources, funding, and equipment

Target Audiences:

- Literate, active (physically sound) adults with good communication skills
- Intensity of the training requires commitment
- Emotionally-laden topics demand stable psychological base

Time Intensity:
- Full-time commitment
- Intensity of training requires teaching preparation and organization of supportive materials
- Recruitment of participants requires investment of time

Content Specialist/Skills:
- Expertise in a variety of fields is necessary
- Also important is knowledge of local resource people (no suggestions given for their recruitment)

Evaluation:
- Most effective is pre- and post-testing
- Some frequency of workers invited, repeat invitations, and number of times asked back
- Follow-up testing of skills at different intervals could be important

Other:
- Cost of equipment and materials may prove a hardship in rural areas
- Rural areas may lack adequate numbers of "hands on" and resource experts

Materials May Be Obtained From:

Susan Quinn
National Resource Center on Alzheimer's Disease
Suncoast Gerontology Center
University of South Florida Medical Center
Health Sciences Center
12901 Bruce B. Downs Blvd., MDC Box 50
Tampa, FL 33612-4799
(813) 974-4355

Program Descriptors: Alzheimer's Association, Alzheimer's disease, AoA, cardiovascular system, cognition, communication skills, CPR, dementia, emergency plans, family, family dynamics, first aid, grief, hearing, home, home health, incontinence, job skills, medication, mental health, peer support, personal care, resources, respite, safety, service organizations, training, vision

ALZHEIMER'S DISEASE AND RELATED DISORDERS FAMILY SUPPORT GROUP LEADER'S MANUAL

[1988(p)]

Developer:
- Betty Grandquist
- Iowa Department of Elder Affairs

Program Category:
- Support Group

Abstract:

The manual, produced by the Iowa Department of Elder Affairs, is intended as a guide for starting and maintaining Alzheimer's disease support groups. Information on Alzheimer's disease is deliberately excluded because this knowledge is assumed present in those interested in forming support groups. References to resources and further information are made. Sections included are: function of support groups, types of groups, sponsorship, evolution of support groups, group dynamics, leadership, discussion topics, how to develop a support group, references and recommended readings, and where to get more information. This also includes information on the difference between Alzheimer's Association Chapter sponsored support groups and independent Alzheimer's support groups and a description and philosophy of the Alzheimer's Association support group network. Appendix includes resource listing, newsletter reprints, policies, and speaker and membership forms.

Curriculum Content:
- None Specified

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Knowledge of aging, family, caregiver, and Alzheimer's disease issues
- Organizational
- Knowledge of community resources
- Nurse
- Social worker

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Nursing home
- Hospital
- Community organization
- Government agency
- Local Alzheimer's Association Chapters

Materials and Costs:

• Facilitator/trainer/leader manual	Unlisted
• Camera ready newsletters	Included
• Sample news release(s)	Included
• Administrative forms	Included
• List of support groups	Included
• Resource list	Included
• Total pages of materials (approx)	163

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:

- State of Iowa
  Department of Elder Affairs

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Community social groups or service organizations
- Skilled nursing facilities, hospitals
- Existing Alzheimer's support groups, not affiliated yet with the Alzheimer's Association

Target Audiences:

- Specifically geared to a lay person who will be a leader of an Alzheimer's support group
- At least a high school level of literacy
- Working knowledge of groups such as church groups
- Large print facilitates use for older person

Time Intensity:

- Two to three days a month preparing materials for monthly meeting
- Specific instructions (agenda, meeting notifications, telephone tree, assuring attendance) for preparation

Content Specialist/Skills:

- Intended for lay person/leaders of existing support groups
- Manual sufficient to prepare a person to lead an existing group

Evaluation:

- Attendance level only method described
- Program material used should be examined if attendance wanes
- Facilitators should be aware of how peer group assess their jobs as leaders

Other:

- Overview of starting a support group, but little detail

Materials May Be Obtained From:

Mary Ann Young
Iowa Department of Elder Affairs
914 Grand Avenue, 236 Jewett Building
Des Moines, IA 50319
(515) 281-4655

Program Descriptors: Alzheimer's disease, resources, state unit on aging, support group

ALZHEIMER'S FAMILY SUPPORT GROUPS: A MANUAL FOR GROUP FACILITATORS

[1984(p), c]

Developer:

- Lillian Middleton
- Suncoast Gerontology Center
  University of South Florida Medical Center

Program Category:

- Support Group

Abstract:

This program is an introductory, practical guide to Alzheimer's disease and family support groups. It was developed to assist professionals, paraprofessionals, and interested lay persons in understanding Alzheimer's disease and developing and sustaining family support groups. The target audience of this program is the present or potential coordinator or facilitator of family support groups. This program incorporates the following content: a study of Alzheimer's disease (symptoms, theories of cause, research, diagnosis, dementia, behaviors, and their management); definition of self-help groups (types, concepts, models, leadership, goals, and benefits); rationale for use of family support groups (structure, process, content, and patient groups); establishing a group (ground work, publicity, planning, and activities); and description of the evolution of the Suncoast Alzheimer family support group. Sample letters, press releases, news articles, newsletters, bibliographies, and other handouts supplement the content.

Curriculum Content:

- Community resources/formal services
- Chronic illness and/or senile dementia
- Behavioral changes/behavioral problems
- Roles/responsibilities/family dynamics
- Coping with stress

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Group process
- Organization
- Administrative
- Knowledge of aging, Alzheimer's disease
- Teaching skills
- Social work
- Nurse

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- Community organization

Materials and Costs:

• Facilitator/trainer/leader manual	$10.00
• Camera ready handouts	Included
• Sample news release(s)	Included
• News article	Included
• Administrative forms	Included
• Total pages of materials (approx)	173

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- Developer is willing to be contacted regarding program information at 5401 North Cresta Loma, Tucson, AZ 85704, (602) 887-8387 (private residence).

REVIEWER COMMENTS

Community Characteristics:

- The community should have access to a medical doctor trained in dementia who is willing to assist, allowing for better support and recommendations within the community
- Also recommended is a good referral network to help ensure the participants for the program
- The community should have access to current Alzheimer's information that is updated on a regular basis

Target Audiences:

- Requires participants with a rather sophisticated knowledge of Alzheimer's disease

Time Intensity:

- This program involves an extremely time consuming support group, requiring one to two months to plan and organize with a considerable ongoing time investment due to telephone follow up and support, seeking of sponsorships, and the development of a resource library
- Facilitators must also keep updated on new research, send fliers to announce meetings, arrange for guest speakers, and establish availability of respite services

Content Specialist/Skills:

- A professional should lead the group with the idea of a gradual turnover to a person in the group
- If a professional is not used, the lay leader should consult professional advice on a regular basis

Evaluation:

- No program evaluation was included

Other:

- The manual may read at a level that may lose a lay person
- It is idealistic in nature, discussing the "perfect support group," and therefore may be difficult to implement
- May not work quite as well in a rural area as in an urban area where there is geriatric research going on
- Difficult to implement in a rural area where more of a general caregiving support group may be needed rather than one which is limited to Alzheimer's caregivers
- The program manual might be better used as a resource to develop classes

Materials May Be Obtained From:

Susan Quinn
National Resource Center on Alzheimer's Disease
Suncoast Gerontology Center
University of South Florida Medical Center
Health Sciences Center
12901 Bruce B Downs Blvd, MDC Box 50
Tampa, FL 33612-4799
(813) 974-4355

Program Descriptors: adult process, Alzheimer's disease, AoA, dementia, difficult behaviors, support group

S3

DEVELOPING ALZHEIMER'S DISEASE FAMILY SUPPORT GROUPS - AN EDUCATION AND TRAINING MANUAL

[1986(d)]

Developer:

- Linda J. Redford
- Linda J. Wright
- University of Kansas Medical Center
  Center on Aging

Program Category:

- Support Group

Abstract:

Developing Alzheimer's Disease Family Support Groups provides an education and training tool for professionals and for family members who wish to begin, implement, and sustain support groups specific to Alzheimer's disease. This program has as its objectives the following: 1) coordination of existing Alzheimer's Disease and Related Disorders Associations, State Units on Aging, Area Agencies on Aging, and other community groups in identifying areas of need in the geographic area to be served; 2) cooperation between the above group and program facilitators to secure facilities and publicize activities; 3) education of professional and lay persons on Alzheimer's disease, related cognitive disorders, and caregiver issues; 4) identification and training of volunteers who will act as resource persons and facilitators for Alzheimer's family support groups in areas otherwise not being served.

This manual provides detailed instruction for a two-day-long educational session. Timed schedules, outlines and content are provided for both. Day 1 seeks to enable participants to describe symptoms of cognitive impairment, characteristics of Alzheimer's disease and related disorders, the impact of such conditions on the individual and family, and resources available for them. Topics include aging and dementia, major types and causes of dementia, terminology definition, drugs, Multi-Infarct Dementia, depression, individual and family impact and effects, and financial/legal considerations. Day 2 seeks to enable participants to illustrate communication skills relative to meaningful interaction with individuals and groups and to name and describe the characteristics of each step of the

implementation of family support groups in underserved areas. Topics include the following: communication; group process; group concept (types and elements); and initiating and sustaining group meetings.

Within the manual background information, planning activities, budget considerations, and other helpful suggestions regarding facilities, mailings, media releases, supplies, audiovisual equipment, accrediting issues, evaluations, and monitoring are reviewed. Appendices include sample letters, news releases, educational handouts, bibliographies, order forms, outlines, checklists, questionnaires, and evaluations.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Legal issues
- Financial issues
- Community resources/formal services
- Health care issues/health care professionals
- Behavioral changes/behavioral problems
- Chronic illness and/or senile dementia
- Medication management
- Sensory deprivation and the communication process
- Roles/responsibilities/family dynamics
- Decision making/problem solving/communication skills
- Group process
- Physical changes with aging

Setting:

- Developed for rural setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Knowledge of Alzheimer's disease and related dementias
- Communication skills
- Community resources
- Group process
- Nurse
- Social worker

Suggested Resources/Professionals:

- None Specified

Collaborative Organizations:

- Senior center
- Hospital
- Day care
- Community organization
- Government agency
- Alzheimer's Association Chapters

Materials and Costs:

Facilitator/trainer/leader manual	$10.00
Sample news release(s)	Included
Sample participant evaluation	Included
Sample leader evaluation	Included
Plus postage	Unlisted
Total pages of materials (approx)	109

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Self-report of attitude and behavior change
- Follow-up contact
- Program participant evaluation
- Support group questionnaire
- Participant questionnaire

Evaluation Results Available From:

- See "Materials May be Obtained From"

Selected Developer Comments:

- Initiated to be used in rural areas; small communities, but may be used in other settings
- Some material related to Alzheimer's disease bears revision; updating
- Several concepts and format may still be useful, especially with respect to communication and support group process

REVIEWER COMMENTS

Review In Progress

Materials May Be Obtained From:

Linda J. Wright
The University of Kansas Medical Center
39th and Rainbow Boulevard, Room 5026B
Kansas City, KS 66103
(913) 588-1204

Program Descriptors: aging process, Alzheimer's Association, Alzheimer's disease, AoA, cognition, communication skills, dementia, difficult behaviors, emergency plans, family, family dynamics, health care professional, long term care, peer support, problem solving, resources, safety, support group, volunteer

DEVELOPING A SUPPORT GROUP ORGANIZATION (FORMERLY "THEY'RE NOT ALONE")

[1986(d), 1989(p), c]

Developer:

- Elizabeth McKinney
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Support Group

Abstract:

Developing a Support Group Organization is one of a series of Helping Families Help Themselves programs developed at the Family Support Center of Good Samaritan Hospital and Medical Center. It is a guide for professionals considering sponsoring self-help groups within their work setting. The program focuses on the development of the open-ended, continuing support group which has an element of independence as one of its long-term goals, the objective of which is to provide direct assistance such as education, coping skills, peer support and self-help to patients and families.

Included in the guidelines are descriptions of support group types and support group models, suggestions for getting group meetings started, methods for conducting meetings, strategies for addressing problems, guidelines for professional facilitators, a description of stages in the support group cycle, suggestions for revitalizing a flagging group, and suggested optional programs for support groups. The program manual also includes samples of the following: (1) checklist for planning education meetings; (2) publicity checklist for education meetings; (3) support group meeting checklist; (4) inquiry log; and (5) sign-up sheet.

Curriculum Content:

- Training materials for health education programs, peer counseling, and support group planning are suggested and information given as to where to send for curriculum materials.

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Communication
- Knowledge of caregiver issues
- Leadership
- Social worker
- Nurse

Suggested Resources/Professionals:
- Sources for advertising
- Relevant resource materials for distribution to participants

Collaborative Organizations:
- Any agency or institution in a community

Materials and Costs:

• Facilitator/trainer/leader manual	$8.95
• Program description	Included
• Administrative forms	Included
• Special package available	
• Quantity reductions available	
• Total pages of materials (approx)	32

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Meyer Memorial Trust

Type of Evaluation:
- Not evaluated

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Part of a "how-to" series.

REVIEWER COMMENTS

Community Characteristics:
- Demonstrate enough numbers of people with a common need
- Larger communities with nursing home chains, hospitals, or AAAs would facilitate this more readily with the professional humanpower, space, organization, and education

Target Audiences:
- Specific/common need - psychological or physical
- Time of day, transportation, physical disabilities, and attendees' ages may determine facilites and schedule of meetings
- Specific characteristics will vary according to particular group needs

Time Intensity:
- Well written, detailed, and easy to follow
- If only one group, time for preparation, arrangements, and meeting time
- Obvious increases with greater numbers of groups

Content Specialist/Skills:
- Organization
- Public relations
- Community knowledge
- "Lived through" or expertise in content area
- Programming
- Group process
- Community leadership to identify attendees

Evaluation:
- None stated
- Questionnaire could be used
- Observation and record of group's growth, progression, and attendance could be utilized

Rurality:
- Sufficient numbers of a specific need and professionals and expertise must exist to facilitate this
- The ease of manual's use would certainly help rural adaptability

Other:
- With much literature on support groups, this offers a good general, condensed, appropriate, and easy-to-understand manual

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: health care professional, hospital, peer support, resources, speakers bureau, support group, volunteer

DEVELOPMENT, IMPLEMENTATION, AND OPERATION OF FAMILY SUPPORT GROUPS FOR THE RELATIVES OF FUNCTIONALLY DISABLED ELDERLY

[ ]

Developer:

- Christopher L. Hayes
- Center for the Study of Pre-Retirement and Aging
  The Catholic University of America

Program Category:

- Support Group

Abstract:

The Development, Implementation, and Operation of Family Support Groups for the Relatives of Functionally Disabled Elderly program consists of six sessions, lasting approximately one and one-half to two hours each. The program is appropriate for social service agencies, churches, synagogues, Area Agencies on Aging, and private practitioners.

The program describes how to develop, plan, and implement support groups for caregivers of functionally disabled older adults. The six workshops are titled: "*The Perspectives of Both the Caregiver and Disabled Elder,*" "*Clarifying the Needs of the Caregiver,*" "*The Medical and Behavioral Implications of Chronic Illnesses,*" "*Strengthening Lines of Communication Between the Caregiver and Disabled Elder,*" "*Alternatives in Housing and Levels of Care,*" and "*The Utilization of Community Resources.*"

The goal is to provide social service agencies, churches, synagogues, Area Agencies on Aging, and private practitioners with the necessary technical knowledge to start a family support group.

An eclectic approach was used. Each session consisted of the presentation of educational material and information, therapeutic interaction and group problem-solving, and advocacy-related activities. A research component to the project was conducted to identify the problems that family members confront in the role of caregiver and the effectiveness of support groups to alleviate the accompanying stress.

The materials include the educational content and planning and implementation (staffing, materials, and funding). The appendices include research results, references, newspaper articles, and evaluation.

Curriculum Content:

- Communication
- Group process

Setting:

- None Specified

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Advanced degree in social work, psychology, or gerontology, or paraprofessional volunteers or caregivers if they have had training
- Experience working with family caregivers
- Experience facilitating groups
- Knowledge of available community resources
- Social worker
- Nurse
- Counselor

Suggested Resources/Professionals:

- None Specified

Collaborative Organizations:

- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	Unlisted
Camera ready handouts	*Unlisted*
Sample participant evaluation	Unlisted
Total pages of materials (approx)	74

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Commonwealth of Virginia
  Department for the Aging

Type of Evaluation:
- Self-report of attitude and behavior change

Evaluation Results Available From:
- Contained Within Program Materials

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Community Characteristics:
- Good cross section of agencies interested in forming a coalition to establish and run program
- One agency must be the sponsor
- This agency must have credibility and links with other agencies who will make referrals to program
- Program requires at least a minimum level of interested and available professionals because this model relies on agency staff and practitioners

Target Audiences:

- Adult children and spouses who are caring for a disabled relative in the community
- Caregivers considering institutional placement
- Potential caregivers looking toward the future

Time Intensity:

- Fair amount of time to assess community needs and resources initially
- Developers suggest at least four weeks for sponsoring agency to publicize the group

Content Specialist/Skills:

- Professionals or paraprofessionals
- Authors recommend professionals with advanced degree, social work, psychology, or gerontology
- Paraprofessionals (a volunteer or caregiver) well trained and supervised in conducting groups could also facilitate program
- All leaders should have some experience with family caregivers

Evaluation:

- Feedback forms to evaluate initial community workshops included
- Pre-/post-test has been conducted with three groups
- Workshop participants decreased feelings of burden and increased their internal focus of control

Other:

- User of manual needs professional training
- Program not recommended for people trying to improve a poor relationship with their parents
- Rural areas may not have a large enough coalition of agencies to begin this program

Materials May Be Obtained From:

Christopher L. Hayes
National Center for Women & Retirement Research
Long Island University
Southhampton, NY 11968
(516) 283-4000

Program Descriptors: communication skills, community resources, discussion group, family, family dynamics, frail elderly, peer support, resources, state unit on aging, support group, training, university

INVOLVING MEN IN CAREGIVER SUPPORT GROUPS: A PRACTICAL GUIDEBOOK

[1989(p), c]

Developer:

- Geraldine Jacobs
- Graduate School of Social Work and Social Research
  Bryn Mawr College

Program Category:

- Support Group

Abstract:

Involving Men in Caregiver Support Groups is meant to serve as a practical guide to planning and operating support groups of caregivers which are attuned to the special needs and concerns of men. The population being served and the characteristics of individual participants will directly bear upon the group's structure, the frequency of meetings, the location of the meetings, and the type of group sponsorship.

Suggestions for planning and implementation of the program include information in the areas of considerations to be made in organizing a male-oriented support group; marketing strategies to employ in reaching out to male caregivers; the male viewpoint regarding caregiver support groups — their likes, dislikes, and recommendations; topics men want addressed in support groups; and materials and organizations available to assist support group organizers and leaders.

Also included in the Guidebook are suggestions for group meeting content in the areas of practical information, skill development, and emotional/social issues.

Curriculum Content:

- Coping with stress
- Planning, implementation, organizational strategies for male-oriented self-help group

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Organizational
- Experience in the area of group dynamics
- Emotional strength
- A non-threatening, straight-forward style
- A sense of humor
- Empathy
- Caregiving experience
- A non-judgmental attitude
- Knowledge of community resources
- Patience and understanding
- Knowledge of cultural diversity and its implications for aging and caregiving
- Social worker
- Nurse

Suggested Resources/Professionals:
- Professionals to conduct informational seminars

Collaborative Organizations:
- Religious facility
- Community organization
- Corporations
- Social or fraternal organizations
- Sponsorship from an appropriate organization

Materials and Costs:

• Facilitator/trainer/leader manual	$3.00
• Program description	Included
• Total pages of materials (approx)	20

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- American Association of Retired Persons Andrus Foundation

Type of Evaluation:
- None Specified

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- For content information write or call Dr. Lenard W. Kaye, Professor, at above address and number listed under "Materials May Be Obtained From"

REVIEWER COMMENTS

Community Characteristics:
- Sponsorship through churches, synagogues, fraternal organizations, hospitals, and community clinics in which the male caregiver could feel comfortable
- Potential use by lay organizations as long as they meet on mutual territories, such as a library

Target Audiences:

- Participants need to be well educated and physically mobile

Time Intensity:

- Several months to plan
- Fair amount of time to recruit group members
- Special marketing plan formulated to overcome "male" barriers

Content Specialist/Skills:

- Group facilitator needs good communication skills, group leadership skills, and knowledge of the community
- Guide book should be utilized by people already working in the field

Evaluation:

- No formal evaluation provided

Rurality:

- Could be implemented in rural areas, however, more background work may be needed to overcome the more predominant male barriers typical of rural areas

Materials May Be Obtained From:

Geraldine Jacobs
Bryn Mawr Graduate School of Social Work
300 Airdale Road
Bryn Mawr, PA 19010
(215) 527-5403

Program Descriptors: AARP, college, community resources, cultural, men, peer support, resources, stress, support group

S7

MOBILIZING NETWORKS OF MUTUAL SUPPORT: HOW TO DEVELOP ALZHEIMER'S CAREGIVERS SUPPORT GROUPS

[1983(p), c]

Developer:
- Lisa P. Gwyther
- Beverly Brooks
- Duke University Center for the Study of Aging
  Family Support Program

Program Category:
- Support Group

Abstract:

This program grew out of the experiences of the Duke University Center for Aging. The manual is designed to assist families and professionals in initiating and sustaining support groups for family caregivers of elders with Alzheimer's disease. The manual addresses program background, caregiver needs, support group benefits, participants, timing and facilities, group leadership, facilitator characteristics (family member and professional roles) assessment, planning meetings, community information, foundation of knowledge, meeting agenda, cultivation of referral sources, suggestions for successful meetings, newcomers, low attendance, newsletters, networks, outreach, advocacy, volunteers, money and Alzheimer Association Chapters. Numerous handouts include reference materials and articles, samples of forms, newsletters, letters, press releases, bibliography, and a resource list. The manual suggests joint professional and family-member leadership. The educational aspects of a support group are stressed with many supportive materials included.

Curriculum Content:
- None Specified

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Knowledge of caregiver, aging, family, and Alzheimer's disease issues
- Organizational

Suggested Resources/Professionals:
- Two-person team (a professional and a family caregiver) to facilitate
- Support from a multi-agency community planning meeting
- Literature on Alzheimer's Association and on dementing illness

Collaborative Organizations:
- Nursing home
- Hospital
- Community organization

Materials and Costs:

Facilitator/trainer/leader manual	$10.00
Camera ready handouts	Included
Camera ready newsletters	Included
Sample news release(s)	Included
Program description	Included
Brochure/pamphlet	Included
News article	Included
Administrative forms	Included
Resource list; Media "cheat sheet"	Included
Total pages of materials (approx)	111

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:

- Babcock Foundation
  North Carolina

Type of Evaluation:

- Self-report of attitude and behavior change
- Community organization strategies tested in 11 states

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- None Specified

REVIEWER COMMENTS

Community Characteristics:

- Community group connected with an aging program (AAA, hospital, social service program, home health agency, hospice) based on Alcoholics Anonymous model
- Professional partnership between agency and individual family caregivers

Target Audiences:

- Grass-roots level
- Persons familiar with group process (church or social service organization)

Time Intensity:

- Two to four days per month for a professional outside of job time for media contact, notice of meetings, and identification of participants
- Easy steps with examples of agendas, media releases, and professional recruitment

Content Specialist/Skills:
- Social service background
- Team of present/former family caregiver and professional to co-chair meetings
- Professionals (with more time, established programs, and resource information) are key to starting program

Evaluation:
- No methods given
- Emergence of new support groups begun by original group attendees are seen as positive feedback
- Questionnaires completed by members periodically
- Feedback from professionals in the community who know group members

Materials May Be Obtained From:

Lisa Gwyther
Duke University Medical Center
Box 3600
Durham, NC 27710
(919) 684-2328

Program Descriptors: Alzheimer's Association, Alzheimer's disease, family, mental health, peer support, support group

POLISHING OUR PEOPLE SKILLS (P.O.P.S.)

[1986(p), c]

Developer:

- Katherine Byrkit
- Tim Nay
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Support Group

Abstract:

Polishing Our People Skills is a self-contained training program designed to expand the communication skills of support group members. This material is directed at leaders within a support group who volunteer to guide the support group members through six modules of material.

The program builds upon the shared experience of group members utilizing handouts, guided activities, role playing, and discussion. P.O.P.S. provides the vehicle to improve the quality of support group services to families and individuals seeking help. Objectives of the program include helping participants appreciate the importance of confidentiality in the support group and in helping relationships; teaching a support group member how to assume the role of a support group helper; enabling support group helpers to accurately determine the support group service most appropriate to help fill the needs of individuals and families seeking help; acquainting support group helpers with the basic principles of active listening, helpful responding techniques, empathy, communication, and "communication stoppers" and how to avoid them; exposing support group helpers to special problems that come up within the helping experience that require outside assistance; and teaching the difference between age-related and disease-related issues and the difference in the information, referral and support necessary for them.

The program is divided into six learning modules, plus a seventh for the purpose of program evaluation. The format of the program should be established according to the needs of the participants.

Curriculum Content:

- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Decision making/problem solving/communication skills
- Coping with stress

Setting:

- Developed for any setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Familiarity with program materials
- Group leadership skills
- Communication skills
- Knowledge of group process and family and caregiving issues
- Nurse
- Social worker

Suggested Resources/Professionals:

- None Specified

Collaborative Organizations:

- Community organization
- Health care agencies

Materials and Costs:

• Facilitator/trainer/leader manual	$15.00
• Camera ready handouts	Included
• Sample participant evaluation	Included

VHS video tape (15 min)	$75.00 ($45 RENTAL)
Administrative forms	Included
Special package available	
Quantity reductions available	
Total pages of materials (approx)	78

Program Replication:
- None Specified

FUNDING AND EVALUATION

Original Funding:
- Multnomah County Area Agency on Aging
- Meyer Memorial Trust

Type of Evaluation:
- Participant evaluation

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- None Specified

REVIEWER COMMENTS

Community Characteristics:
- Respected and viable agency to sponsor
- A good community resource base

Target Audiences:
- High school graduates
- Adequate communication and human behavior skills

Time Intensity:
- Maximum of 22 hours to plan and execute program
- Preparation time less, depending upon leader and group expertise

Content Specialist/Skills:
- Good group leadership skills
- Communication skills
- Knowledge of human behavior dynamics

Evaluation:
- Program provides participant evaluation
- Leader could also request verbal feedback and keep a record of attendance

Rurality:
- Hard in some rural areas to find a leader with expertise to implement program without outside input from a professional

Other:
- Time required depends on literacy level and communication skills of group
- Well written
- Oriented toward professionals

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: aging process, alcohol, cognition, communication skills, decision making, discussion group, elder abuse, family, family dynamics, hospital, peer support, problem solving, retirement, stress, suicide, support group

STARTING A SELF-HELP GROUP FOR CAREGIVING OF THE ELDERLY

[1984(p), c]

Developer:
- Louise Fradkin
- Mirca Liberti
- Jacob Stone
- Children of Aging Parents
  Philadelphia Self-Help Clearinghouse

Program Category:
- Support Group

Abstract:

Starting a Self-Help Group for Caregivers of the Elderly was written for caregivers of elderly parents, relatives, and friends who would like to develop a supportive self-help group to address the diverse problems, concerns, and issues confronting them. Professionals should note that this program is designed as a self-help manual for caregivers who want to run their own support group and can be used by a professional to assist a group in getting started and continuing independently.

The program offers guidelines in such areas as: 1) what is a self-help group and why such groups are needed; 2) the pitfalls of starting a group; 3) steps in planning and beginning a group, (4) keeping the group going and growing, (5) fund raising, (6) conducting the meetings, (7) sharing information on community resources, (8) discussing political and advocacy issues, (9) keeping the meetings productive, and (10) recruiting guest speakers to address special topics of interest. Included in the program manual is a bibliography of self-help publications and additional resources.

Curriculum Content:
- Organization, planning, implementing strategies for self-help groups

Setting:

- Developed for any setting
- Run in rural setting

Minority:

- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:

- Ability to share and mold activity toward the common thrust of group interest
- Willingness to participate in a revolving leadership
- Group process experience
- Caregiving knowledge/experience
- Social worker
- Gerontologist

Suggested Resources/Professionals:

- Professionals willing to serve as guest speakers

Collaborative Organizations:

- Support of community professional and service agencies

Materials and Costs:

• Facilitator/trainer/leader manual	$15.00
• Camera ready handouts	Included
• Program description	Included
• Total pages of materials (approx)	20

Program Replication:

- Developer should be contacted regarding replication (See "Materials May be Obtained From")

FUNDING AND EVALUATION

Original Funding:
- The Colonial Penn Insurance Companies

Type of Evaluation:
- Attendance count
- Self-report of attitude and behavior change

Evaluation Results Available From:
- None Specified

Selected Developer Comments:
- Mirca Liberti and Louise Fradkin are Co-Directors of Children of Aging Parents and either may be contacted for materials or program information (at address and phone listed under "Materials May Be Obtained From")
- Starter packet for Self Help Groups includes manual plus "Instant Aging Sensitivity Training" (Cost: $25.00)

REVIEWER COMMENTS

Community Characteristics:
- Program very mobile — could be started in any community

Target Audiences:
- Group with a common problem — learning to cope with problems encountered when caring for an elderly parent

Time Intensity:
- Approximately eight hours to plan and execute

Content Specialist/Skills:

- A professional to help form group
- Facilitator should have ability to share and mold activities toward a common thrust or group interest
- Experiential knowledge helpful for someone without group process background

Evaluation:

- None included

Other:

- Manual easy to understand
- Easy program to implement in rural community
- Simple evaluation methods such as attendance records or participant evaluation forms could be utilized

Materials May Be Obtained From:

Mirca Liberti
Children of Aging Parents
2761 Trenton Road
Levittown, PA 19056
(215) 945-6900

Program Descriptors: community resources, finances, peer support, resources, support group, volunteer

S10

SUPPORT GROUPS FOR CAREGIVERS OF THE AGED

[1981(p), c]

Developer:

- Harriet Rzetelny
- Joanna Mellor
- The National Supports Program
  Community Service Society of New York

Program Category:

- Support Group

Abstract:

The Support Groups for Caregivers of the Aged program is geared toward professional trainers, classroom or field instructors, agency supervisors, or any other professionals interested in training others to develop and run group programs for caregivers.

The program manual is composed of five sections. The material in each section is presented in the form of: Learning Objectives, a Content Guide, and a Training Guide for each set of learning objectives. The program manual includes an outline of a sample training series divided into three, three-and-one-half-hour sessions held on a weekly basis.

Section I covers identification of the caregiver; differentiation between formal and informal support systems; identification of value dilemmas faced by caregivers; identification of common problems and recognition of points of stress in caregiving situations; and review of the session and what's ahead. Section II deals with the role of group programs in meeting the needs of caregivers; special problems in group formation; guidelines for choice of group model; planning the first meeting and outreach strategies; introduction to the concept of self-help; and review. Section III covers characteristics of self-help groups; the use of the self-help continuum to evaluate the movement of groups toward self-help; contrasting the role of the facilitator with traditional leadership; fostering caregiving networks and policy issues; and wrap up and evaluation. Other topics discussed in the manual include developing an individualized training program; factors impacting on the formation of caregivers' groups; a network defined; forming a caregivers' coalition; influencing policy decisions; how caregivers' groups can influence policy; etc. A bibliography is also included for the trainer who wants to do further reading in any content area.

Curriculum Content:
- Overview of aging process - biological, psychological, or social
- Community resources/formal services
- Coping with stress

Setting:
- Developed for any setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Organizational skills
- Knowledge of community resources
- Knowledge of program materials and aging, family, and caregiver issues
- Communication and problem-solving skills
- Casework/social work experience
- Knowledge of group process
- Social worker
- Gerontologist
- Heath care professional

Suggested Resources/Professionals:
- Community support; guest speakers

Collaborative Organizations:
- Senior center
- Social Service organizations

Materials and Costs:

Facilitator/trainer/leader manual	$7.50
Camera ready handouts	Included
Sample participant evaluation	Included
Program description	Included
Administrative forms	Included
Total pages of materials (approx)	72

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Administration on Aging
  Office of Human Development Services
  U.S. Department of Health and Human Services

Type of Evaluation:

- Participant evaluation

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- The National Supports Program is no longer in operation
- Program content information available through Joanna Mellor (212) 841-5347

REVIEWER COMMENTS

Community Characteristics:

- Sponsored by social service agencies, social workers, or case managers
- Community centers, residential centers, congregate housing, or nursing homes may be sponsors

Target Audiences:

- Caregivers of the frail elderly--care for Alzheimer's patients emphasized

Time Intensity:

- If all options investigated, program would require much time
- Possible to identify parts of the manual that would apply to the community's situation
- Several weeks to a month to thoroughly investigate manual

Content Specialist/Skills:

- Facilitator needs group leadership and management skills
- Knowledge of local community and aging network helpful to leader

Evaluation:

- No specific evaluation plan included
- Pre-/post-test evaluation could be developed from training exercises

Other:

- Excellent and very helpful book
- With minor modifications, program would work well in rural areas
- Good training exercises provided
- Final section of manual addresses realms of advocacy and how caregiver groups can influence policy — this issue is not usually addressed in manuals such as this

Materials May Be Obtained From:

Office of Information
Community Service Society of New York
105 East 22nd Street
New York, NY 10010
(212) 614-5314

Program Descriptors: advocacy, aging process, Alzheimer's disease, AoA, community resources, health care professional, needs assessment, peer support, resources, stress, support group

YOU'RE NOT ALONE

[1987(p), c]

Developer:

- Elizabeth McKinney
- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Program Category:

- Support Group

Abstract:

You're Not Alone outlines the implementation of support groups organized to address the problems of dealing with, or caring for, chronically disabled loved ones. The primary goal in the establishment of such support groups is the minimization of frustration and isolation on the part of the caregiver and of the patient.

The support group meetings are intended to provide help beyond traditional medical and social services and to encourage an atmosphere of empathy, acceptance, education, hope, self-esteem, humor, catharsis, and empowerment.

Topics covered in the manual are as follows: why support groups are needed, types of support groups, how to start a support group, leadership, managing difficult situations, the support group cycle, revitalizing a flagging group, optional activities and programs, the developing organization, etc.

The format of the program may vary, depending on the needs of participants. The program has been designed for use by lay persons and family caregivers.

Curriculum Content:

- Support group development

Setting:
- Developed for any setting
- Run in rural setting

Minority:
- Non-specific to any minority

IMPLEMENTATION

Suggested Skills/Credentials:
- Organizational
- Group process
- Communication
- Nurse
- Social worker
- Health care professional/paraprofessional

Suggested Resources/Professionals:
- None Specified

Collaborative Organizations:
- College
- Religious facility
- National organizations with particular focus
- Cooperation and information from specific organizations

Materials and Costs:

• Facilitator/trainer/leader manual	$5.00
• Administrative forms	Included
• Special package available	
• Quantity reductions available	
• Total pages of materials (approx)	61

Program Replication:

- None Specified

FUNDING AND EVALUATION

Original Funding:

- Good Samaritan Hospital and Medical Center
  Education and Family Support Services

Type of Evaluation:

- None Specified

Evaluation Results Available From:

- None Specified

Selected Developer Comments:

- Modifications for rural use include greater emphasis on non-group support (e.g., telephone linkages).

REVIEWER COMMENTS

Community Characteristics:

- This program is most appropriately replicated in a community with a sufficient population of people facing the same or a similar issue
- It could be used to develop various types of support groups since it is generally rather than specifically oriented and adaptable to most settings or agencies

Target Audiences:

- Participants should share a common problem and be motivated to find ways to improve their situations
- They need to be willing to share their thoughts, ideas, and feelings

Time Intensity:

- Sponsoring agency needs to organize, publicize, and get the group started
- Instructions for the process are detailed and specific so the coordinator's time will be spent actually doing what needs to be done rather than finding out what needs to be done
- It is an on-going program with a lot of time investment in the beginning and then gradually becoming less time consuming

Content Specialist/Skills:

- Program was designed to be organized by a nonprofessional
- Authors advise assembling a group of professionals as advisers and recruiting professionals to give educational presentations on specific topics
- Person who facilitates the program should have group leadership skills

Evaluation:

- Method used involved monitoring of attendance

Other:

- The instructions that are included in the manual are specific about what works and what does not work when developing and conducting a support group
- Transportation to the group and respite might be issues that need to be considered

Materials May Be Obtained From:

Joyce Gimbel
Good Samaritan Hospital and Medical Center
Education and Family Support Services
Neurological Sciences Center
1015 N.W. 22nd Ave., N-300
Portland, OR 97210-5198
(503) 229-7348

Program Descriptors: peer support, speakers bureau, support group, training, volunteer

PROGRAM REVIEWERS

The following professionals are listed alphabetically under the directory for which they reviewed programs.

Directory of Education Programs for Caregivers of Elders

Debbie Bass
Consultant
7092 Kings Arm Drive
Manassas, VA 22111

Kathleen Bock
National Project Director
Shepherd's Centers of America
6700 Troost, Suite 616
Kansas City, MO 64131

Anita Bowen
Program Consultant
2926 Kershaw
Columbia, SC 29203

Jim Coomes
Family Consultant
Brain Impaired Adult Resource Center
P.O. Box 3019
Clear Lake, CA 95422

Leah Eskenazi
Director, Caregiver Respite Services
Good Samaritan Hospital and Medical Center
1040 N.W. 22nd Avenue -N-300
Portland, OR 97210

Vicki Farrell
Program Director
Mountain Regional Resource Center
Area Agency on Aging
Second and Normal Streets
Chico, CA 95929

Lisa Gwyther
Family Support Program
Box 3600
Duke Medical Center
Durham, NC 27710

Angela Heath
(AARP) Program Specialist
1331 Vermont Avenue, N.W. #3C
Washington, DC 20005

Glenice Johnson
Assistant Professor
Coordinator, Gerontology Program
University of Minnesota - Crookston
Crookston, MN 65716

Michele Johnston
Administrator
San Juan Living Center
1043 Ridge
Montrose, Colorado 81401

Kathy Kelly
Manager
Service and Education Programs
Family Survival Project
425 Bush Street, Suite 500
San Francisco, CA 94108

Karen Kent
Director
Older Adult Program
Eastside Mental Health Center
2840 Northup Way
Bellevue, WA 98004

Elizabeth McKinney
Coordinator, Self Help Services
Good Samaritan Hospital and Medical Center
1040 N.W. 22nd Avenue -N-300
Portland, OR 97210

Zelda Menuskin
Coordinator, Senior Companion and Respite Program
Catholic Community Services-Northern
1311 11th Street
Greeley, CO 80631

Gretchen Miller
Gerontology Specialist
Sioux Valley Memorial Hospital
300 Sioux Valley Drive
Cherokee, Iowa 51012

Lynn Osterkamp
Parent Care
Human Development Center
University of Kansas
4089 Dole
Lawrence, KS 66045

Eric Pfeiffer
Director, Suncoast Gerontology Center
University of South Florida Health Science Center
12901 Bruce B. Downs Boulevard
MDC - Box 50
Tampa, FL 33612-4799

Connie Reinhart
Newbury County Council on Aging
1304 Hunt Street
Newbury, SC 29108

Karen A. Roberto
Associate Professor
Coordinator, Gerontology Program
University of Northern Colorado
Greeley, CO 80639

Jane Royse
Trainer/Consultant
Community Care Resources
Wilder Foundation
919 Lafond Avenue
St. Paul, MN 55104

Barbara Sand
Assistant Professor
University of Nebraska Medical Center
College of Nursing - Lincoln Division
215 Benton Hall
Lincoln, NE 68588-0620

Teri Schafer-Nelson
Program Coordinator
Elderly Outreach
830 Newton Road
Iowa City, IA 52246

Virginia Schiaffino
Executive Director
National Federation of Interfaith
Volunteer Caregivers, Inc.
105 Mary's Avenue
P.O. Box 1939
Kingston, NY 12401

Vicki Schmall
Extension Gerontology Specialist
Oregon State University
161 Milam Hall
Corvallis, OR 97331-5106

Pat Taylor
Executive Director
North Shore Senior Center
620 Lincoln Ave
Winnetka, IL 60093

Jean Toon
Assistant Director
Midland Area Agency on Aging
305 N. Hastings
P.O. Box 905
Hastings, NE 68902-0905

Shirley Travis
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• Program Identifier Codes: E - Education **R** - Respite **S** - Support

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South Carolina Educational Television . . . E4
Southcentral Michigan Commission on Aging . . . R6
Spencer, Peggy E. . . . E26
State of Connecticut Department on Aging . . . E9
Stiehl, Ruth . . . E40, E41
Stone, Jacob . . . S9
Suncoast Gerontology Center
  University of South Florida Medical Center . . . R13, R19, S2
Support Source . . . E22
Texas Agricultural Extension Service
  Texas A & M University . . . E14, R1, R18
Travelers Center on Aging
  University of Connecticut . . . E9
University of the District of Columbia
  Institute of Gerontology
  College of Education and Human Ecology . . . E30
University of Georgia Cooperative Extension Service . . . R2
University of Kansas Medical Center
  Center on Aging . . . S3
University of Michigan, Institute of Gerontology . . . E7
University of Washington-Seattle, Institute on Aging . . . E21
University of Wisconsin-Madison . . . E29
University of Utah, Graduate School of Social Work
  Caregiver Support Project . . . E39
University of Vermont Extension Service . . . E15
Varela, Gene . . . E5

* Program Identifier Codes: E - Education R - Respite S - Support

Vermont Independence Fund
  State Agency of Human Services E15
Warren, Judith L. E14, R2, R18
Women's Initiative
  American Association of Retired Persons E24
Wright, Linda J. S3
Zielinski, Carol E7

* Program Identifier Codes: E - Education R - Respite S - Support

CENTER PUBLICATIONS

Directory of Caregiver Education Programs for Elders
Directory of Health Education Programs for Elders
Directory of Intergenerational Programming

These directories are the result of one of the Center's primary activities, which has been to identify, catalog and review programs in caregiver education, health education, and intergenerational relations. Directories contain cost, implementation, funding, evaluation, and contact information for each program included. A special effort was made to identify programs specifically developed for rural and minority audiences. Additionally, names and addresses of program reviewers, all interested in rural elders, will help expand the directory user's network of professional resources.

Reducing Barriers to Participation in Family Caregiver Training: Respite Options for Caregiver Training

This booklet addresses a major barrier to caregiver education: respite for the caregiver while s/he is attending caregiver training. The issue is particularly problematic because respite is less available in rural areas. This guide identifies ways caregiver trainers can provide respite and offers some principles that will assist in the process. It contains a list of caregiver education programs, an extensive bibliography, and a list of "self-help" materials for caregivers.

Health Promotion for the Rural Black Elderly: A Program Planning and Implementation Guide

This is a step-by-step guide for developing and implementing health promotion programs among rural black elders. The guide offers suggestions for reaching low-literacy elders and providing low-budget programs using local resources. It contains information for accessing printed resource materials and a list of toll-free technical assistance numbers.

Leadership Enhancement for the Active Retired

Training materials based on two years of demonstration and development offer rural elders the opportunity to keep active both physically and mentally while addressing local problems. This program teaches skills and techniques of leadership and how to identify community resources for problem solving. Materials include a training manual with curricular materials, implementation guidelines, and resources and supplemental handouts.

PUBLICATION ORDER FORM

Title	Price	Quantity	Cost
1. Directory of Education Programs for Caregivers of Elders	$12.00	_____	_____
2. Directory of Health Education Programs for Elders	$10.00	_____	_____
3. Directory of Intergenerational Programming	$18.00	_____	_____
4. Reducing Barriers to Participation in Family Caregiver Training: Respite Options for Caregiver Training	$ 8.00	_____	_____
5. Health Promotion for the Rural Black Elderly: A Program and Implementation Guide	$ 8.00	_____	_____
6. Leadership Enhancement for the Active Retired	$22.00	_____	_____
7. Center Newsletter Bridges	Yes___	No___	NC

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